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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: A & M Consultants, & (Name of Limited Liability Consultants)	<mark>なこ</mark> mpany)
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Morgan L. Selett (Contact Person)	- 20 111
(Firm/Company)	- Age August Age Augus
1551 N. Flag les Drive UPH-11 (Address)	SECRETARY OF STATE ALLAHAS SEEPELORIDE
West Palm Beach F1. 33401 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Movgan L. Seut at (215 (Name of Contact Person) (Area Code	817-1303 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the lim	nited liability company as it a	appears on the records of	of the Flo	rida Depa	ırtmer	nt
of State is: A	2 M Consultant	s, XIC	-			
2. This limited liability Florida	company was organized un	der the laws of:		SECRETARY I	2811 NOV -7	
3. The Florida docume	ent/registration number of thi	s limited liability comp	any is:			
4. I, Morgan (Print Name	L. SelCT of Person Resigning)	_, hereby resign as a _	MG (Pri	R int Title)		
of this limited liabilit resignation in writing	ry company and affirm the li	mited liability company	has beer	n notified	of my	7
	liv					
Signature of Kesignin	ng Member, Managing Mem	ber or Manager				
	\$25.00 (Required) \$30.00 (Optional)					