

L11000049494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

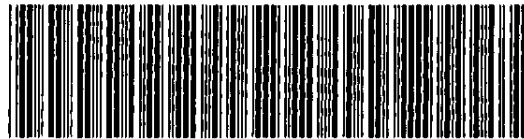
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/08/11--01004--009 **35.00

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11 NOV 18 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

NOV 21 2011

EXAMINER



**FLORIDA DEPARTMENT OF STATE
Division of Corporations**

November 10, 2011

**LUIS E. TORRES
PRO ACCOUNTING AND FINANCIAL SOLUTIONS
1925 NE 45TH STREET SUITE #128
FORT LAUDERDALE, FL 33308**

**SUBJECT: ABMM CONSTRUCTION LLC
Ref. Number: L11000049494**

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TALLAHASSEE, FLORIDA**

We have received your document for ABMM CONSTRUCTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

**Joey Bryan
Regulatory Specialist II**

Letter Number: 311A00025557

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ABMM CONSTRUCTION, LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

LUIS E. TORRES

(Contact Person)

PRO ACCOUNTING AND FINANCIAL SOLUTIONS, INC

(Firm/Company)

1925 NE 45TH STREET SUITE # 128

(Address)

FORT LAUDERDALE, FL 33308

(City/State and Zip Code)

For further information concerning this matter, please call:

LUIS E. TORRES

(Name of Contact Person)

at (954) 667-0673

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
NOV 18 PM 3:34
TALLAHASSEE, FLORIDA
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

FILED
NOV 18 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

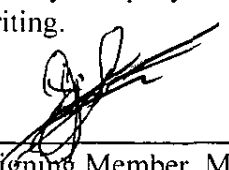
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: ABMM CONSTRUCTION, LLC

2. This limited liability company was organized under the laws of:
THE STATE OF FLORIDA

3. The Florida document/registration number of this limited liability company is:
L11000049494

4. I, LUIS E. TORRES, hereby resign as a MANAGER
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)