L11000063845

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/Otate/Eip/ Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A C. M
K E Y

Office Use Only

B. KOHR

SEP 2 G 2012

EXAMINER



500239884915

08/24/12--01006--018 **55.00

SECRETARY ST SECTIONS SECRETARY ST SECRETARY SECRETARY ST SECRETARY ST SECRETARY ST SECRETARY SECRETARY ST SECRETARY SECRETARY

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Price Rite Plumbing and (Name of Limit	ited Liability Compar
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Zach McBride	रू अ
Contact Person)	SEP 24
(Firm/Company)	
2645 Gentian Rd	
(Address)	
Venice, FL 34293	
(Citv/State and Zip Code)	
For further information concerning this matter	er, please call:
Zach McBride	at (941) 256-4866
(Name of Contact Person)	(Area Code & Davtime Telephone Numbers
Enclosed please find a check made payable to \$25 Filing Fee	so the Florida Department of State for: \$55 Filing Fee &
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Lallahassee, Fiorida 32301	Tallahassee. Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability com ce Rite Plumbin		pears on the records	of the Florida D	
2. This limited liab S - Corpora	ility company was o	rganized und	er the laws of:		12 SEP 24
3. The Florida doct L11000083	_	umber of this	limited liability com	pany is:	PH 4: 13
4. I. Zachary J McBride (Print Name of Person Resigning)		, hereby resign as a MGR / OWNER (Print Title)			
	bility company and a		ited liability compan		
Signature of Resi	gning Member, Man	naging Memb	er or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required \$30.00 (Optional	•			