## L11000087020

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JUL 25 2012

**EXAMINER** 



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07/24/12--01023--003 \*\*25.00



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: WATER FLOOD AND RESTORATION LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted fo filing.
Please return all correspondence concerning this matter to:
YOSI
(Contact Person)
WATER FLOOD AND RESTORATION LLC
(Firm/Company)
5610 SW 54 CT
(Address)
DAVIE,FL 33314
(City/State and Zip Code)
For further information concerning this matter, please call:
YOSI at ( 954 ) 6787313
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum{\subset}\$\$ \$\$\sum{\subset}\$\$ \$
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  CREET/COURIER ADDRESS:  MAILING ADDRESS: gistration Section vision of Corporations D. Box 6327 rullahassee, 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

1. The name of the limited liability company as it of State is: WATER FLOOD AND RE		-
2. This limited liability company was organized u	nder the laws of:	
3. The Florida document/registration number of th L11000087020	nis limited liability com	npany is:
<sub>4. I,</sub> YOSI ASSAF	, hereby resign as a	MANNING MEMBER
(Print Name of Person Resigning)		(Print Title)
of this limited liability company and affirm the l resignation in writing.	limited liability compar	ny has been notified of my
KOK		
Signature of Resigning Member, Managing Me	mber or Manage	Ostrikinder gerkjulisem e metre i kilolori krismitismi monori jegi evisike

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)