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(Req	uestor's Name))			
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(Addı	ress)				
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PICK-UP	WAIT	MAIL			
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SECRETARY OF STATE

D. BRUCE
JUN 1 1 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Transconcrete Designs 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:				
Jereny Bensen (Contact Person)				
Trans Concrete Designs				
Port Saint lucie FL 34953				
Port Saint lucie FL 34953 PM 5				
For further information concerning this matter, please call:				
Jereny Bensen at (772) 494 3021 (Name of Contact Person) (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: MAILING ADDRESS:				
Registration Section Registration Section				
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32314				
•				

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it ap		f the Florida Department
2. This limited liability Flor	ity company was organized und	er the laws of:	
3. The Florida docum	nent/registration number of this	limited liability compa	any is:
_ L120	000052263		•
4. I, USON (Print Nan	Nuftczak ne of Person Resigning)	, hereby resign as a	MBRM (Print Title)
of this limited liabi resignation in writi	lity company and affirm the liming.	ited liability company	has been notified of my
	2 U #	45	
Signature of Resign	ning Member Wangging Memb	er ör Manager	FALLAHA
Filing Fee:	\$25.00 (Required)		AR)
Certified Copy:	\$30.00 (Optional)		OF STA