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SECRETARY OF STATE
ALLAHASSEE FLORIDA

MAR 0 5 2013 D. BRUCE

COVER LETTER

Division of Corporations
SUBJECT: Lyles Handyman Service 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:
Rita B. KREMER (Contact Person)
Ly/E'S HANDYMAN SERVICE LLC (Firm/Company)
6408 BIKINI ROAD (Address)
SAPASOTA H. 34241 (City/State and Zip Code) For further information concerning this matter, please call:
For further information concerning this matter, please call:
(Name of Contact Person) at (94/) 312-4487 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$25 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

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 of State is:	limited liability company as	s it appears on the records of the	e Florida Department
2. This limited liab	ility company was organize	d under the laws of:	2019 MAR -4 SECRETARY TALLAHASSI
<u></u>	000126873	of this limited liability company	Vis: : EFLORI
	bility company and affirm th	he limited liability company ha	
X Signature of Resi	gning Member, Managing	Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	J	