L1300	0002502
▶, (Requestor's Name)	
(Address) (Address)	000251621240
(City/State/Zip/Phone #)	
	09,/20/1301000024 **55.00
(Business Entity Name) (Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	13 SEP 20 AH II: 35 MLLAHASSEE FLORIDA
Office Use Only	

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## COVER LETTER

TO: Registration Section Division of Corporations

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## SUBJECT: LMB Financial Services, Inc.

(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:

Carol Lowe-Chin				
(Contact Person)				
LMB Financial Services,	, LLC.			
(Firm/Company)				
3543 SW 180 Way				
(Address)			<u>م</u> . ۲.	
Miramar, FL 33029				<u></u>
(City/State and Zip Code)				
For further information concerning this matt	ter, please call:		<u>77</u> 175	C Juanta
Carol Lowe-Chin	<sub>at (</sub> 954	<b>479-7930</b>		
(Name of Contact Person)		& Davtime Telephone Nu	mber	မီး
Enclosed please find a check made payable	to the Florida D	enartment of State for:	سمند	
■ \$25 Filing Fee		55 Filing Fee &		
		Certified Copy		
STREET/COURIER ADDRESS		MATLING ADDRESS	2.	
Registration Section		Registration Section		
Division of Corporations		Division of Corporation	ns	
Clifton Building		P.O. Box 6327		
2661 Executive Center Circle		Tallahassee, Florida 32	314	

CR2E079 (5/06)

Tallahassee. Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

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

2. This limited liability company was organized und Florida	er the laws of:	JALLAHASE	13 SEP 20	f Laurita Curvara Mainti Cuilitai
3. The Florida document/registration number of this L13000002502	limited liability company	is: FLORE	68 II: 3	a organity a organity a screenity for support
4. I, Denese Martin (Print Name of Person Resigning)	, hereby resign as a Mar	naging Di	irect	or

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

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Signature of Resigning Member, Managing Member or Manager

Filing Fee: Certified Copy:

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\$25.00 (Required) \$30.00 (Optional)

CR2E079 (5/06)