# 13000068111

(Req	uestor's Name)	-
(Add	lress)	
(Add	Iress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

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B. BOSTICK AUG 3 0 2013

**EXAMINER** 

#### COVER LETTER

TO: Registration Section
Division of Corporations

## SUBJECT: Florida Labor Specialists 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:

#### **David Curry**

(Contact Person

### Florida Labor Specialists LLC

(Firm/Company)

7025 CR 46A Ste. 1071-445

(Address)

Lake Mary, FL 32746

(City/State and Zip Code)

For further information concerning this matter, please call:

**David Curry** 

\_,321

277-3920

(Name of Contact Person)

(Area Code & Davtime 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-

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 2013 AUG 29 AM 10:

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 company as it a ida Labor Specialists LLC	• •	orida Department 	
2. This limited liab	lity company was organized un	der the laws of:	2013 AUG	
3. The Florida docu L130000681	ment/registration number of thi	s limited liability company is:	\$ 29 AH IO:	
<sub>4. I,</sub> Randolph Davis		, hereby resign as a member me		
-	ame of Person Resigning)		rint Title)	
of this limited liab resignation in wri	oility company and affirm the ling.	nited liability company has bee	n notified of my	
Signature of Resi	gning Member, Managing Mem	ber or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			



August 5, 2013

DAVID CURRY FLORIDA LABOR SPECIALISTS LLC 7025 CR 46A STE. 1071-445 LAKE MARY, FL 32746

SUBJECT: FLORIDA LABOR SPECIALISTS LLC

Ref. Number: L13000068111

H3 AUG 29 AH IO: 40 BEORE GARY OF STATE

We have received your document for FLORIDA LABOR SPECIALISTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person resigning and the person signing the resignation documentmust be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 213A00018741

Barbara Bostick Regulatory Specialist II

www.sunbiz.org