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## **COVER LETTER**

TO: Registration Section Division of Corporations			
	MASONARY ame of Limited Liability Cor		LLC
(142	inic of chilica classifity Col	mpany)	
The enclosed member, managing m filing.	ember or manager resig	gnation and fee(s) are s	ubmitted for
Please return all correspondence-co	ncerning-this-matter-to:		
CHARLES WICHAEL	PATRIE		
(Contact Person)	<del>                                      </del>	<del>-</del>	Sites .
		_	FICTOR AND
(Firm/Company)		_	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
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(Address)		<del></del>	22
DEZAND, FC. (City/State and Zip C	32720	_	कृतः 🖁
(City/State and Zip C	lode)		
For further information concerning	this matter, please call:		
C. W. RATBLE (Name of Contact Person)	at(386	527-23	66
(Name of Contact Person)	(Area Code	e & Daytime Telephone l	Number)
Enclosed please find a check made  \$25 Filing Fee		Department of State for \$55 Filing Fee & Certified Copy	:
STREET/COURIER ADDRESS:	:	MAILING ADDRE	SS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporati	ions
Clifton Building		P.O. Box 6327	
2661 Executive Center Circle		Tallahassee, Florida	32314
Tallahassee, Florida 32301		i anunassee, i ionida .	J#J I™

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 appears on the records of the Florida Department	
of State is: LEVELPRO WASONARY SERVICES LLC	
2. This limited liability company was organized under the laws of:	
3. The Florida document/registration number of this limited liability company is:	
4. I, CHARLES MICHAEZ RATBLE, hereby resign as a MGR. AND ALL OF  (Print Name of Person Resigning) (Print Title) HEZ	FICES D NR
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	
C. Wielco Jan	
Signature of Resigning Member, Managing Member or Manager	

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)