L/3000/1/3434

| (Req | uestor's Name) | | | | |
|---------------------------|------------------|-------------|--|--|--|
| (Add | ress) | | | | |
| (Add | iress) | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bus | iness Entity Nar | me) | | | |
| (Doc | ument Number) | | | | |
| Certified Copies | Certificates | s of Status | | | |
| Special Instructions to F | iling Officer: | | | | |
| | | | | | |
| | NOV - 4 Z | 013 | | | |
| | A. 11573 | | | | |
| | | | | | |

Office Use Only

900253143879

10/31/13--01023--009 **25.00



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ENCOMPASS BUSINESS SERVICES, 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:

| Robert J Droubie | |
|---------------------------|--|
| (Contact Person) | |
| RJD Associates, Inc | 2013 |
| (Firm/Company) | 24 CT 109 CT 100 |
| PO Box 2456 | |
| (Address) | And the second s |
| Largo, FL 33779 | 77 77 79 79 79 79 79 79 79 79 79 79 79 7 |
| (City/State and Zip Code) | |

For further information concerning this matter, please call:

| Robert J Drouble | _{at (} /2/ | ,475-1142 | | |
|---|---------------------|----------------------------|--|--|
| (Name of Contact Person) | <u> </u> | & Daytime Telephone Number | | |
| Enclosed please find a check made payable | le to the Florida D | epartment of State for: | | |
| ■ \$25 Filing Fee | □ \$ | 55 Filing Fee & | | |

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Certified Copy

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

| | limited liability company as it ompass Business Servi | • • | s of the | Florida [| Departr | nent |
|--|--|---------------------------|----------|-------------|---------------|----------|
| 2. This limited liabi | lity company was organized t | under the laws of: | | WITE THE | 2813 OCT 31 | |
| 3. The Florida docu L130001134 | ment/registration number of t | his limited liability con | npany is | WASSEEL FO | ET 31 PH | - COLUMN |
| 4. I, RJD Associa | ates, Inc. ume of Person Resigning) | , hereby resign as a | MGR | (Print Titi | 1: 2] le) | |
| of this limited liab resignation in wri | ility company and affirm the | | | | fied of | my |
| Signature of Resignature | abil , bresident gning Member, Managing Me | JD Grociate | , In | U | | |
| 2.8 | , <u>,</u> | | | | | |
| Filing Fee: | \$25.00 (Required) | | | | | |
| Certified Copy: | \$30.00 (Optional) | | | | | |