L14000040633

(Requestor's Name)
	(Address)
((Address)
(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
((Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
<u> </u>	-
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12/08/14--01051--006 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Best Remodeling Serves (Name of Limited	LLC d Liability Company)
The enclosed member, resignation or dissociati	on and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to:
Brian Wilges (Contact Person)	
(Firm/Company)	
508 Broward Ter (Address)	
Winter Haven, FL 33884 (City/State and Zip Code)	
For further information concerning this matter,	
Bran Wilyes a (Name of Contact Person)	1 (407) 310 - 1305 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t 2 \$25 Filing Fee	he Florida Department of State for: \$ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability compa	ny as it appears on the records of the Florida Department	
of State is: <u>Be</u>	st Remodeling Se	ruices, LLC	
2. The Florida docu	iment/registration num	ber assigned to this limited liability company is:	
L140000	40633		
3. The date this me	mber/manager withdre	w/resigned or will withdraw/resign is: 11/26/14	
4.1, Brian W	ame of Person Resigning)	, hereby withdraw/resign as a	
	(Print Title)	% ± ∞	773 : 527, 422
of this limited liab resignation in wri	pility company and affi	rm the limited liability company has been notified being	- -
306			
Signature of Di	ssociating Member or I	Kesigning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	Sworn to and subscribed to this 20th day of November 2 Brian Wilges, ID Presented: Florida Driver's 1	1014 by
CR2E079 (2/14)		Chily S. BOOTL	

EMILY S. BOOTH Notary Public. State of Florida My comm. expires March 31, 2018 Commission Number FF 108199