## M0000002477

(Re	equestor's Name)	
(,,,,	rquostor o rrainio,	,
(Ad	Idress)	
•	•	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	, MAIL
	_	<del></del>
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
E		
•		
		$\Omega X$

Office Use Only



600086412476



01/30/07--01011--002 \*\*50.00

SECRETARY OF STATE TALLAHASSEE FLORIDA

January 19, 2007

RE: MONOLITH COMMERCIAL CABINETS, LLC. (GA. DOM.)
MOTIMAR VENTURES, LLC. (DE. DOM.)

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is \_\_1\_\_ checks in the amount of \$50.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure RPP



## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Fursuant to the provisi	ions of section 608.416(2) or 608.50	19, Florida Statutes,	the undersigned,	
C T CORPORATION SYSTEM		, her	, hereby resigns as	
	(Name of Registered Agent)	,		
Registered Agent for	MOTIMAR VENTURES, LLC.	(DE. DOM.)		
**************************************	(Name of Limited Liability		and the second s	
M00000002	477			
(Document Nu	imber, if known)			
	tion was mailed to the above listed ted and the office discontinued on t		pany at its last known address.  date on which this statement is filed.	
If signing on behalf of	C T CORPORATION SYSTE	M - Theresa Alficri	O7 JAN: SECRETA FALLAHAS	
	(Typed or Printe ASSISTANT SEC	•	30 A	
	(Capacity)		HII: 44 STATE LORIDA	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Active limited liability company
Administratively dissolved/voluntarily dissolved/
withdrawn limited liability company

FILING FEES: \$ 85.00 Activ \$ 25.00 Admi

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 608.416(2) or 608.309, Florida Sta	tutes, the undersigned,	
C T CORPORATION SYSTEM		, hereby resigns as	
districted districts from A (Malacian of Malacian). As a district of the second of the	(Name of Registered Agent)		
Registered Agent for	MOTIMAR VENTURES, LLC. (DE. DOM.)		
	(Name of Limited Liability Company)	tion to management upon an anticolate trade to the state of the state	
M00000002	477		
(Document Nu	umber, if known)		
A copy of this resigna	tion was mailed to the above listed limited liabilit	y company at its last known address.	
The agency is termina	ted and the office discontinued on the 31st day af	ter the date on which this statement is filed.	
	Thealf	64 93 & 118 APRIL 117 W/M1	
If signing on behalf of	(Signature of Resigning Agent) fan entity:	7	
	CIT CORPORATION SYSTEM - Theresa A	Alfieri Alfi 0;	
	(Typed or Printed Name) ASSISTANT SECRETARY	JAN AHAS	
	(Capacity)	SEE SEE	
	FILING FEES: \$ 85.00 Active limited liability \$ 25.00 Administratively dissol withdrawn limited liab	company ved/voluntarily dissolved/ility company	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314