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SECRETARY OF STATE TALLAHASSEE FLORIDA

DEC - 9 2014 T. CARTER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Slona Ken Hardy 7 Cleaning CC (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
William 5 Storaku & RW
Slonaker Painting & Cleaning CC
1801 No Federal Muy 14-61
(Address) (Address) (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\square\$ \$\frac{1}{2}\$\$ \$\frac{1}{2}\$\$ Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

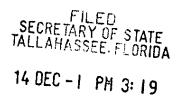
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)





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 of State is:	limited liability company as it appears on the records of the Florida Department
2. The Florida docu	ment/registration number assigned to this limited hability company is:
4. I, L	mber/manager withdrew/resigned or will withdraw/resign is:
MM	Print Title)
of this limited liab resignation in wri	bility company and affirm the limited liability company has been notified of my ting.
Hom	Skah
Signature of Dis	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)
Cerunea Copy.	φ30.00 (Optional)