

PD7000050403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

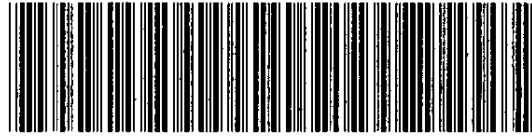
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/02/08--01053--001 **30.00

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FILED
08 SEP 18 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ODR
9/23/08

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXPRESS Storm Shutters, Inc
(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:

William F. Hill
(Contact Person)

My Hurricane Shutters, LLC
(Firm/Company)

7590 TAMPON CAY CIRCLE
(Address)

Lake Wales, FL 33467
(City/State and Zip Code)

For further information concerning this matter, please call:

William F. Hill at (561) 304-3995
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 8, 2008

WILLIAM F. HILL
7590 TARPON COVE CIRCLE
LAKE WORTH, FL 33467

SUBJECT: EXPRESS STORM SHUTTERS, INC.
Ref. Number: P07000050403

We have received your document for EXPRESS STORM SHUTTERS, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as officer/director for a corporation is \$35 per person resigning.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 008A00049142

I am enclosing a new check \$35.00 please take care of this ASAP.

WfH,
Bill Hill

RECEIVED
SEP 15 AM 10:00
SECRETARY OF FLORIDA
TALLAHASSEE, FL

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, William F. Hill, hereby resign as Managing Member
(Title)

of Express Storm Phases LLC
(Name of Corporation)

P07000050403
(Document Number, if known)

a corporation organized under the laws of the State

FILED
08 SEP 18 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

William F. Hill

(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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