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(Da)	munatada Nama)			
(Requestor's Name)				
(Add	dress)			
(Address)				
(City	y/State/Zip/Phone	e #)		
PICK-UP	■ WAIT	MAIL		
(D.)	siness Entity Nar			
(Bus	siness Emity Nar	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Tiling Officer:			
Special Instructions to Filing Officer:				
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Office Use Only



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T. HAMPTON

COVER LETTER

-	stration Section sion of Corporations	
		.===
SUBJECT:		ARD, LLC ed Liability Company)
	(Name of Emple	cu chaomy company)
The enclosed filing.	d member, managing member or r	manager resignation and fee(s) are submitted for
Please return	n all correspondence concerning th	his matter to:
Washing	ton Rivadeneira	
	(Contact Person)	
Aqua Su	oplies Export, Inc	
	(Firm/Company)	
1322 SE	46th Lane 102	
	(Address)	
Cape Co	ral, FL 33904	
	(City/State and Zip Code)	
For further i	nformation concerning this matter	, please call:
Washing	ton Rivadeneira	at (407, 435-9935
(N	lame of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed pte	ease find a check made payable to	the Florida Department of State for:
	\$25 Filing Fee	\$55 Fiting Fee &
		Certified Copy
	OURIER ADDRESS:	MAILING ADDRESS:
Registration		Registration Section
Division of (•	Division of Corporations
Clifton Build		P.O. Box 6327
	ive Center Circle Florida 32301	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 a	s it appears on the records of the ARD, LLC	he Florida Department
2. This limited liab	pility company was organize	ed under the laws of:	
3. The Florida doc <u>L07000062</u>		of this limited liability compan	y is:
4. 1, <u>Kent</u> (Print N	Densley Jame of Person Resigning)	, hereby resign as a Me	ember (Print Title)
resignation in wr		he limited liabitity company ha	is been notified of my 12 JUL
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		16 PHK