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| (Requestor's Name) | | | |
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| (City/State/Zip/Phone #) | | | |
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| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| , , | | | |
| (Document Number) | | | |
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| Certified Copies Certificates of Status | | | |
| Continued Copies | | | |
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| Special Instructions to Filing Officer: | | | |
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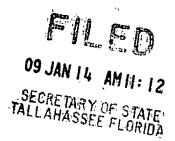
N. Guilligan JAN 15 2009

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|---------------------------------------|----------------------------------|
| SUBJECT: Lawn Maxx, LLC | | |
| (Name of Limited | Liability Compan | у) |
| The enclosed member, managing member or mafiling. | nager resignati | ion and fee(s) are submitted for |
| Please return all correspondence concerning this | matter to: | |
| Jason Daniel Moninger | | |
| (Contact Person) | · · · · · · · · · · · · · · · · · · · | |
| Lawn Maxx, LLC | | |
| (Firm/Company) | | |
| 1035 Jeffrey Rd | | |
| (Address) | | |
| Tallahassee, FL 32312 | | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, | lease call: | |
| Jason Daniel Moninger | 850 5 | 19-3757 |
| | | Daytime Telephone Number) |
| Enclosed please find a check made payable to the | e Florida Depa | artment of State for: |
| \$25 Filing Fee | | Filing Fee & |
| | | Certified Copy |
| STREET/COURIER ADDRESS: | | AILING ADDRESS: |
| Registration Section | | gistration Section |
| Division of Corporations | | vision of Corporations |
| Clifton Building | | D. Box 6327 |
| 2661 Executive Center Circle | Tal | llahassee, Florida 32314 |
| Tallahassee, Florida 32301 | | |

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | e limited liability company as n Maxx, LLC | | the Florida Department | |
|--|--|-------------------------------|-------------------------|--|
| 2. This limited lial | bility company was organized | under the laws of: | | |
| 3. The Florida doc L010000113 | cument/registration number of | this limited liability compar | ny is: | |
| 4. I, Jason Daniel Moninger (Print Name of Person Resigning) | | Manager hereby resign as a | | |
| (Print) | Name of Person Resigning) | | (Print Title) | |
| resignation in w | ability company and affirm the riting. Signing Member, Managing M | | nas been notified of my | |
| Signature of Res | igning Memoer, Managing M | ember of Manager | | |
| | \$25.00 (Required) | | | |
| Certified Copy: | \$30.00 (Optional) | | | |