

LD3000022987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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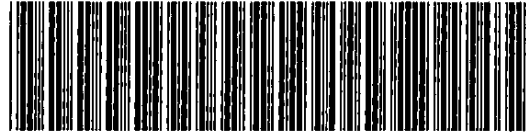
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



Arbogas Enterprises LLC d/b/a

**Accent
Landscape**

6051 Carlton Road
Port Saint Lucie, Florida 34987

Phone: (772) 429-2321 • Fax: (772) 429-2322
WWW.arbogas123@aol.com

To: Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

February 21, 2007

SUBJECT: Arbogas Enterprises, LLC

Dear Sir or Madam:

The enclosed member, managing member or manager resignation Fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Robert W. Hargis

Arbogas Enterprises, LLC

6051 Carlton Road Port Saint Lucie, FL 34987

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TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

Robert W. Hargis at (772) 429-2321

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

\$25.00 Filing Fee



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Arbogas Enterprises, LLC

2. This limited liability company was organized under the laws of:

Florida

3. The Florida document/registration number of this limited liability company is:

L03000022987

4.1, Robert W. Lockwood, hereby resign as a Managing Member
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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