

L04000022899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

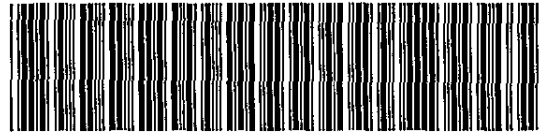
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-19-05
RUBEN CY

TRIPP SCOTT

Attorneys At Law
A Professional Association

Jennifer D. Facarazzo
Direct Dial: 954.760.4930
e-mail: jdf@trippscott.com

August 16, 2005

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

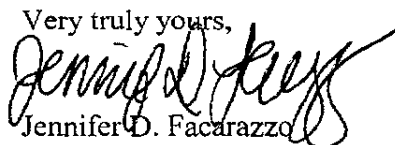
Re: *Creative Landscapes, LLC*

Dear Sirs:

Enclosed please find the following documents: (1) Resignation of Registered Agent for a Limited Liability Company form signed by Lilli Stevens, (2) Resignation of Member, Managing Member or Manager Form signed by Lilli Stevens, and (3) Tripp Scott Check No. 32831 made out to the Florida Department of State in the amount of \$110.00.

Should you have any questions, you can contact me at 954-760-4930.

Very truly yours,



Jennifer D. Facarazzo
For the Firm

JDF/cbm
Enclosures

368249v.1 992732.0002

110 Southeast Sixth Street • Fifteenth Floor • Fort Lauderdale, Florida 33301
Post Office Box 14245 • Fort Lauderdale, Florida 33302
Tel 954.525.7500 • Fax 954.761.8475

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Lilli Stevens

(Name of Registered Agent)

, hereby resigns as

Registered Agent for Creative Landscapes LLC

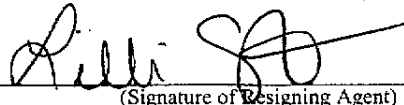
(Name of Limited Liability Company)

L04000022899

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Lilli Stevens

(Typed or Printed Name)

Managing Member

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314