# 104000033021

(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)	
(Document Number)		
Certified Copies	Certificates of	Status
Special Instructions to Filin	ng Officer:	
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Office Use Only



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FILED
2009 MAY 29 AM 9: 26
SECRETARY OF STATE
TALLAHASSEE, FLORID.

R.A. Resignation
TB 6-1-09

# **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: UNITED WATER CONSERVATION LLC Name of Limited Liability Company
DOCUMENT NUMBER: <u>L0400033021</u>
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Victor Lucas Name of Person
Name of Firm/Company
POBOX 576
DANIA BCH, FL 33004 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VICTOR LUCAS at (305) 345-3891  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

### **MAILING ADDRESS:**

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

#### STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



# FLORIDA DEPARTMENT OF STATE Division of Corporations

May 20, 2009

VICTOR LUCAS 1440 NW 8TH STREET DANIA BEACH, FL 33004

SUBJECT: UNITED WATER CONSERVATION LLC

Ref. Number: L04000033021

We have received your document for UNITED WATER CONSERVATION LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 909A00017194

SECRETARY OF STATE IĄĻĻAĶASSĘE, FĻOŖIOĮ

00:8 HA 62 YAM 800S

RECEIVER

# RESIGNATION OF REGISTERED AGENT FOR A LIMITED **LIABILITY COMPANY**

	٠,
Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,	•
Vic ToR Lucas, hereby resigns as	, 5
Registered Agent for UNITED WATER CONSERVATION LLC	
Name of Limited Liability Company	
Lo 40000 3 3 0 2/ 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	
f signing on behalf of an entity:	
Typed or Printed Name	

**FILING FEES:** 

Capacity

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

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