## L04000018715

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>-</u>
(Cit	y/State/Zip/Phone	»#)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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2006 MAR -6 PM 3: 54
ZALLAHASSEE, FLORIDA



February 28, 2006

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

Re: Environmental Waterworks of St. Augustine Document # L04000078715

Dear Filing Officer:

Enclosed please find a Resignation of Registered Agent filing form for the above referenced name, which is to be filed in your office at your earliest convenience. Enclosed is check # 10635 in the amount of \$35.00 for the filing fee. Once filed, please return the filed-stamped copy in the self-addressed envelope. If you have any questions please contact the undersigned at (800) 345-4647.

Sincerely,

Joan M. Coleman

**Enclosures** 

2006 MAR -6 PM 3: 54

## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations			
SUB.	SJECT: Environmental Waterw (Na	vorks of St. Augusti me of Limited Liability		
DOC	CUMENT NUMBER: L040000	78715		
The e	enclosed Resignation of Registered	d Agent for a Limited	d Liability Company and fee are	submitted
Pleas	se return all correspondence conce	rning this matter to the	he following:	
Joan	n M. Coleman (Name of Person)	,	ALL	2006 M.
Сар	pitol Corporate Services, Inc. (Name of Firm/Comp	any)	ALLAHASSEE, FLUKIUA	FILED 2006 MAR -6 PM 3: 54
P.O.	D. Box 1831 (Address)		- FLOKO	4 3: 54 4 3: 54
Aust	stin, TX 78767 (City/State and Zip Co	ode)	· -	Ċ.
For fi	further information concerning this	s matter, please call:		
Joan	n M. Coleman (Name of Person)	at ( <u>800</u> (Area Cod	345-4647 le & Daytime Telephone Number)	
liabili	osed is a check made payable to the lity company or \$25.00 for an admility company.	e Florida Departmen iinistratively dissolve	at of State for \$85.00 for an actived, voluntarily dissolved or with	e limited Irawn limited
Amer Divis P.O. 1	endment Section A sion of Corporations D Box 6327 4	treet Address: Amendment Section Division of Corporatio 09 E. Gaines Street		

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 608.416(	(2) or 608.509, Florida	Statutes, the undersigned	,		
CAPITOL CORP	ORATE SERVICES	<u> </u>	, hereby resigns as			
	(Name of Registered Age	·				
Registered Agent for	Environmental Wa	terworks of St. Aug	gustine, L.L.C.	<u></u>		
	(Name of Lim	nited Liability Company)			<u>۔۔۔۔</u>	
L04000078715						
(Document Nu	mber, if known)	<del></del>				
A copy of this resigna	tion was mailed to the a	bove listed limited liab	oility company at its last k	nown addr	ess.	
The agency is termina	ted and the office discor	ntinued on the 31st day	after the date on which the	his stateme	nt is fi	iled.
	Chlind	Lastine of Resigning Agent)	, ,			
If signing on behalf of	an entity:				2	
	Cheryl Roberts			ALLAHASSEE, FLORID	2006 MAR6	
		yped or Printed Name)		ΑH	素	7
	President			ASS	9	=
		(Capacity)		m.		FILED
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					PM 3: 54	
	FILING.	FFFC.		) A	₽-	
	\$ 85.00 \$ 25.00	Active limited liabili Administratively dis withdrawn limited li	ity company solved/ voluntarily disso iability company	lved/		

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