# L05000049693

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SECKETARY OF STATE
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#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: Fairfield Farms Landscape Design Company, LLC (Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Kim C. Booker (Contact Person) Booker & Associates, P.A. (Firm/Company) 1019 Town Center Drive, Suite 201 (Address) Orange City, Florida 32763 (City/State and Zip Code) For further information concerning this matter, please call: Kim C. Booker (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: **✓** \$25 Filing Fee \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section **Registration Section Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



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SECRETARY OF STATE TALLAHASSEE FLORIDA

#### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as		
of State is: Fai	rfield Farms Landsca	pe Design Company	<u>, LLC</u>
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doce L05000049	ument/registration number of 9693	this limited liability compa	nny is:
<sub>4. I,</sub> Kim C. Booker		, hereby resign as a _m	nember
·	lame of Person Resigning)	<u> </u>	(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability company	has been notified of my
X(			
Signature of Res	igning Member, Managing M	lember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		