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(Ad	ldress)	
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SHOW AND SEE, FLORIDA

### **COVER LETTER**

Division of Corporations	
SUBJECT: Xtreme Lawn Service, LLC	
(Name of Limited L	.iability Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Mer	mber or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Lane Gilmer	<b>5.</b>
(Name of Person)	
Xtreme Lawn Service, LLC	
(Firm/Company)	
Post Office Box 19111	
(Address)	
Panama City Beach, FL 32408	
(City/State and Zip Code)	
For further information concerning this matter, please	e call:
Jean Marie Downing	850 230-5550
	Area Code & Daytime Telephone Number)
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 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee	✓\$55 Filing Fee &
CR2E079 (8/05)	Certified Copy



# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I. Jason Sheppard	, hereby resign as Managing Member
	(Title)
of Xtreme Lawn Service, LLC	
(Lim	ited Liability Company)
a limited liability company organized unc	ler the laws of the State of Florida
and affirm that the limited liability compa	any has been notified in writing of the resignation.
Signature of resigning r	nanager, managing member or member)

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### FILING FEE IS \$25.00

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