## 105000095322

(Requestor's Name)	
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(City/State/Zip/Phone	#)
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SECRETARY OF STATE

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**EXAMINER** 

## **COVER LETTER**

Division of Corporations	
Mathis Maintenance & Lawn Care, LLC SUBJECT:	
(Name of Limited Liability Cor	npany)
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Samantha Mathis	
(Contact Person)	-
Mathis Maintenance & Lawn Care	
(Firm/Company)	
265 Paradise Lane	SECRETAR) SALLAHASS
(Address)	
Apalachicola, FL 32320	
(City/State and Zip Code)	OF STATE
For further information concerning this matter, please call:	
Allen Mathis 850	653-1266
	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I \$25 Filing Fee  \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

Mat	limited liability company as it his Maintenance & Lawn Ca	appears on the records of the Flore, LLC	rida Department	
2. This limited liab Florida Depar	oility company was organized urtment of State	nder the laws of:		
3. The Florida doc L050000953		his limited liability company is:	2012 JUL 1 SECRETAI TALLAHAS	<del></del>
4. I, Samantha M		, hereby resign as a	SEE RY 0	Total Control
of this limited lia resignation in wi	riting.	limited liability company has been	( " ( / )	
Ū	igning Member, Managing Me	mber or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Ontional)			