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SECRETARY OF STATE DIVISION OF CORPORATIONS

Ps \$ 1867 Mher-

TRANSMITTAL LETTER

APRIL 28, 2007

ons.

SUBJECT: ENVIRO-CELL LLC								
(Name of Limited Liability Company)								
DOCUMENT NUMBER: L 0 6 0000 6 77 2 6								
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:								
JOANNE MEI PEYTREMANN (Name of Person)								
ENVIRO-CEU LLC								
(Name of Firm/Company)								
1327 FLAGSTONE AVE.								
(Address)								
CELEBRATION, FL 34747								
(City/State and Zip Code)								
For further information concerning this matter, please call:								
JOANNE MEI								
$\frac{\text{PEYTREMANN}}{\text{(Name of Person)}} \text{ at } (\frac{321}{939} - \frac{4973}{939})$								
(Mea Code & Daytine 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
409 E. Gaines Street
Tallahassee, FL 32399

INHS17(11/02)

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section	608.416(2) or 608.509, FI	lorida Statutes,	the undersig		<u> </u>
JOANNE.	MEI	PEYTREMA	ار لہ ا	reby resigns	as	NISION OF FI
	(Name of Reg	istered Agent)		, ,		美 紹
Registered Agent for _	EN	IRO-CELL	2.0			A-S
			•			TP CS
	4)	ame of Limited Liability Comp	any)			A 2: 55
L 060	0006	1726				55 HS
(Document Nu	mber, if known)					
A copy of this resignat	ion was maile	d to the above listed limite	ed liability com	pany at its l	ast known address	5.
The agency is terminat	ed and the off	ice discontinued on the 31	st day after the	date on wh	ich this statement	is filed.
) (Signature of Resigning A	Yemangent)	<u> </u>	APRIL	28 2007
If signing on behalf of	an entity:	,				, , ,
		(Typed or Printed Nam	10)			
		(Capacity)				

FILING FEES:

\$ 85.00 Active limited liability company

\$ 25.00 Administratively dissolved/voluntarily dissolved/withdrawn limited liability company

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