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(Requestor's Name) (Address)	100080130381
(Address) (City/State/Zip/Phone #)	·
(Business Entity Name) (Document Number)	10/02/0601016002 ***25.00
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Office Use Only	1 De- Dedfa

# **COVER LETTER**

TO: **Registration Section Division of Corporations** 

# SUBJECT: Tradewinds Lawn and Landscape, LLC

(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Debra Bryant** 

(Name of Person)

Tradewinds Lawn and Landscape, LLC

(Firm/Company)

4744 CR 542 H

(Address)

Bushnell, Fl 33513

(City/State and Zip Code)

For further information concerning this matter, please call:

Debra Bryant

(Name of Person)

at (<u>407</u>) <u>467-4707</u> (Area Code & Daytime Telephone Number)

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AHASSEE, FI

STREET/COURIER ADDRESS:

**Registration Section Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, Florida 32301

Enclosed is a check for the following amount:

**✓** \$25 Filing Fee

MAILING ADDRESS:

**Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

\$55 Filing Fee & Certified Copy

CR2E079 (8/05)

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#### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

### **RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I. Felocia Bryant \_\_\_\_\_, bereby resign as \_MGRM

(Title)

or Tradewinds Lawn and Landscape, LLC

(Limited Liebility Company)

a limited liability company organized under the laws of the State of Florida

and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)

# **FILING FEE 18 \$25.00**

Make checks payable to Fibride Department of State and mult to: Division of Corporations F.O. Box 6327 Talighusses, VL 32314

CR2E079 (8/05)