120600117761

(Requestor's Name)					
(Address)					
(Ac	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Ви	isiness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



700108472297

08/24/07--01022--010 **25.00

OF AUG 24 PH 1: 31

DIVISION CONTROL OF

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Agri-Source Fuels, 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:
C. R. Higdon W (Contact Person)
Agri-Source Fuels LLC (Firm/Company)
104 Cypress Point East
Pensacola F1. 32514 (City/State and Zip Code)
For further information concerning this matter, please call:
Oues D. Moore at (850) 439-2700 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the	limited liability company as it	t appears on the records of	the Florida Depa	rtment
of State is:	Agri-Source	Fuels, Inc.		
	ility company was organized u	inder the laws of:		
	ment/registration number of the SOIJ7761	his limited liability compa	ny is:	
4. I,	Higdon V ame of Person Resigning)	, hereby resign as a	MGRM (Print Title)	<u></u>
of this limited liab resignation in wri	oility company and affirm the lating.	limited liability company l	has been notified	of my
	af I		0	IVIO S
Signature of Resignature	gning Member, Managing Me	mber or Manager	7 AUG 24	ECRETARY SION OF
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		РН -: 31	ED STATE