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(Address)				
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S. HAWKES

JUL 6 2010

EXAMINER

COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT:	JBJECT: GREEN POWER SOLUTIONS, LLC Name of Limited Liability Company				
	Name of Limited Liability Company				
DOCUMENT NUMBER	:L0700000869				
The enclosed Resignation for filing.	of Registered Agent for a Limited Liability Company and fee are submitted				
Please return all correspon	dence concerning this matter to the following:				
	W. LAWRENCE				
Nam	e of Person				
	R SOLUTIONS, LLC				
Name of	Firm/Company				
	AN STREET, #558				
A	Address				
	D, FLORIDA 33021				
City/Stat	e and Zip Code				
ASMITH@FIVE	POINTSCORP.COM I for future annual report notification)				
E-mail address: (to be used	for future annual report notification)				
For further information con	ncerning this matter, please call:				
KRISHNA W. LAV					
Name of Per	son Area Code & Daytime 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED **LIABILITY COMPANY**

Pursuant to the provisions	of section 608.416(2) or 608.509, Fl	lorida Statutes, the undersigned,
4	AUDREY SMITH	, hereby resigns as
N	ame of Registered Agent	
Registered Agent for	GREEN POWER	R SOLUTIONS, LLC
		2
	Name of Limited Liability Compa	any ??
L0700000869		2
Document Numb	er, if known	
A copy of this resignation	was mailed to the above listed limite	ed liability company at its last known address.
The agency is terminated a	Quarect Sn	st day after the date on which this statement is file
If signing on behalf of an e	ntity:	
 -	Typed or Printed Name	e
_	Canacity	

FILING FEES: \$ 85.00 Activ \$ 25.00

Active limited liability company
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withdrawn limited liability company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 Tallahassee, FL 32314