Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000029487 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

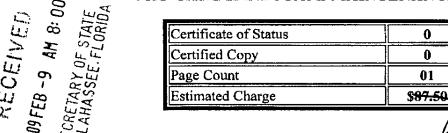
Account Name : ROBERT J. HUTCHINS

Account Number : 119990000126 Phone : (407)833-3777

Fax Number : (407)386-6584

REGISTERED AGENT RESIGNATION

PRO CARE LANDSCAPE MAINTENANCE, LLC



Electronic Filing Menu

Corporate Filing Menu

Help



H09000029487 3

RESIGNATION OF REGISTERED AGENT FOR A LIMITED · LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,) F
Robert J. Hutchins , hereby resigns as		
(Name of Registered Agent)		II.
Registered Agent for Pro Care Landscape Maintenance, LLC		2: 5 3
	OF THE	w
(Name of Limited Liability Company)	<i></i>	
L07000024000		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed limited liability company at its last known address.		
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is	filed.	· .
(Signature of Resigning Agent)		
If signing on behalf of an entity:		
(Typed or Printed Name)		
. (Capacity)		

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withdrawn limited liability company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

INHS17 (08/05)