## 07000046190

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
<b>,</b>	,	
<b>1</b> 0%	/State/Zip/Phone	<u> </u>
(City	/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
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		(XM)

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11/19/07--01053--026 \*\***3**5.00

## **COVER LETTER**

TO: Registration Section Division of Corporations	•
SUBJECT: Harris Tree Trimming & L	
(Name of Limited	Liability Company)
The enclosed member, managing member or ma	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Louis E. Harris, Jr., Manager/Owne	<u>er</u>
(Contact Person)	
Harris Tree Trimming & Lawn Care,	LLC
(Firm/Company)	3.0
5239 14th Avenue North	ALLAHA ALLAHA
(Address)	SPA
St. Petersburg, FL 33710	
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
	<u></u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	e Florida Department of State for: \$55 Filing Fee &
	Contified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	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 an of State is: Harris Tree Trimming & Lav	
2. This limited liability company was organized und Florida	ler the laws of:
3. The Florida document/registration number of this L07000046190	limited liability company is:
4. I, Angel Rodriguez  (Print Name of Person Resigning)	, hereby resign as a Manager (Print Title)
of this limited liability company and affirm the limited resignation in writing.  Signature of Resigning Member, Managing Member	nited liability company has been notified of my ILAHASSEE
	Sw ≥

Filing Fee:

\$25.00 (Required)

Certified Copy:

\$30.00 (Optional)

CR2E079 (5/06)

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