

LO70000083030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

LO7- 83030

(Document Number)

Certified Copies _____ Certificates of Status _____

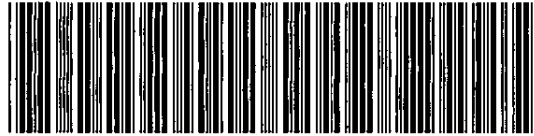
Special Instructions to Filing Officer:

A. LUNT

OCT 28 2008

EXAMINER

Office Use Only



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09/11/08--01022--003 **35.00

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2008 OCT 24 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2008

JONATHAN WESSON
P.O. BOX 1154
SHALIMAR, FL 32579

SUBJECT: THE PALMS LAWN AND LANDSCAPING LLC
Ref. Number: L07000083030

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TALLAHASSEE, FLORIDA

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We have received your document for THE PALMS LAWN AND LANDSCAPING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 708A00049965

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palms Lawn and Landscaping, 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:

Jonathan Wesson
(Contact Person)

Palms Lawn & Landscaping, LLC.
(Firm/Company)

P.O. Box 1154
(Address)

Shalimar, FL 32579
(City/State and Zip Code)

For further information concerning this matter, please call:

Jonathan Wesson at (850) 259-50108
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

Already pd.

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

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TALLAHASSEE, FLORIDA

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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 appears on the records of the Florida Department of State is: Palms Lawn and Landscaping, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
240715433

4. I, Amanda Wesson, hereby resign as a President/Treasurer
(Print Name of Person Resigning) (PLS. resign from all positions held)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Amanda Wesson
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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