1086000000016

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only States Ziph Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
·
(Document Number)
:
Certified Copies Certificates of Status
,
Special Instructions to Filing Officer:

Office Use Only



200156473302

06/03/09--01040--013 **55.00

09 JUN -3 AM II: 47

S. HAWKES

JUN 4 - 2009

EXAMINER

COVER LETTER

SUBJECT: DARKSIDE ENGINEERING (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: 1. Dickingso (Contact Person) PARKSIDE ENGINEERING (Firm/Company) 228 Timberland Dr. (Address) Palm Harbor, Fl. 34(83) (City/State and Zip Code) For further information concerning this matter, please call: 1. Dickingsol (Name of Contact Person) (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee & Certified Copy	TO: Registration Section Division of Corporations				
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: 1. Dickinson (Contact Person) DALKSIDE ENGINEERING (Firm/Company) 238 Timbor Dr. (Address) Palm Harbor, Fl. 34683 (City/State and Zip Code) For further information concerning this matter, please call: 1. Dickinson (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					
For further information concerning this matter, please call: L. Dickinson	(Name of Lim	ned Liability Company)			
Contact Person) DALKSIDE ENGINEERING (Firm/Company) 228 Timberlane Dr. (Address) Palm Harbor, Fl. 34683 (City/State and Zip Code) For further information concerning this matter, please call: 1. Dikinson at (727) 365 - 3293 (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	The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for			
TALKSIDE ENGINEERING (Firm/Company) 228 Timberlane Dr. (Address) Palm Harbor, Fl. 34683 (City/State and Zip Code) For further information concerning this matter, please call: 1. Dickinson (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	Please return all correspondence concerning	this matter to:			
TALKSIDE ENGINEERING (Firm/Company) 238 Timberlane Dr. (Address) Palm Harbor, Fl. 34683 (City/State and Zip Code) For further information concerning this matter, please call: 1. Dikinson (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	L. Dickinson				
(Firm/Company) 28 Timberlané Dr. (Address) Palm Harbor, Fl. 34683 (City/State and Zip Code) For further information concerning this matter, please call: 1. Dirkinson at (727) 365-3293 (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	(Contact Person)				
Palm Harbor, FL. 34683 (City/State and Zip Code) For further information concerning this matter, please call: 1. Dirkinson at (727) 365-3293 (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 &					
Palm Harbor, FL. 34683 (City/State and Zip Code) For further information concerning this matter, please call: L. Dirkinson	(Firm/Company)				
Palm Harbor, FL. 34683 (City/State and Zip Code) For further information concerning this matter, please call: L. Dirkinson	228 Timberlané Dr.				
For further information concerning this matter, please call: L. Dickinson	(Address)				
For further information concerning this matter, please call: L. Dickinson at (727) 365-3293 (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 \$555 Filing Fee &	Palm Harbos El 34693				
A. Dickinson (Name of Contact Person) at (727) 365-3293 (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 &	(City/State and Zip Code)				
(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 &	For further information concerning this matter	er, please call:			
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$\$ \$55 Filing Fee &	L. Dickinson	at (727) 365 - 3293			
\$25 Filing Fee \$\$55 Filing Fee &	(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
	· — · ·	·			
STREET/COURIER ADDRESS: MAILING ADDRESS:	STREET/COURIER ADDRESS:	MAILING ADDRESS:			
-	Registration Section	-			
	Division of Corporations				
	Clifton Building 2661 Executive Center Circle				

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

				TASE S	i -N
1. The name of the	limited liability com	pany as it appea	ars on the records	of the Florida De	partment
of State is: D	ARKSIDE ENG	ineering	LLC	لمبيد! سينية معالم منظر بمبيد (ن)	-W-:=
	ility company was or	•	he laws of:		
	ument/registration nu		nited liability com	pany is:	
4. I, Leonard (Print N	Dickinson ame of Person Resigning	he	ereby resign as a _	MGRM (Print Title)	
of this limited liab resignation in wr	bility company and a iting.	ffirm the limited	d liability compan	y has been notifi	ed of my
Signature of Resi	gning Member, Man	aging Member o	or Manager		
Filing Fee:	\$25.00 (Required	•			
Signature of Resi	gning Member, Man)	or Manager		