

L08000038010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

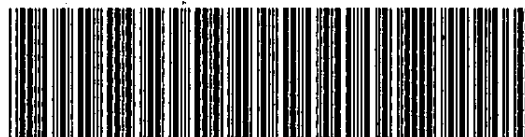
(Document Number)

Certified Copies _____

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05/12/10--01019--010 **25.00

FILED
19 JUN 23 PM 4:00
TALLAHASSEE, FLORIDA

S. HAWKES

JUN 24 2010

EXAMINER

S. HAWKES

JUN 24 2010
MAY 13 2010

EXAMINER
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 13, 2010

NARIS IMPRASERT
144 REVERE ST NW
PORT CHARLOTTE, FL 33952

SUBJECT: SOUTHWEST FL POOL GUARD, LLC
Ref. Number: L08000038010

We have received your document for SOUTHWEST FL POOL GUARD, LLC and your check(s) totaling \$25.00. 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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 110A00012151

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southwest FL Pool Guard, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Naris Impraser

Name of Person

Southwest FL Pool Guard, LLC

Firm/Company

144 Revere St NW

Address

Port Charlotte, FL 33952

City/State and Zip Code

SouthwestFLPoolGuard@earthlink.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Naris Impraser

Name of Person

at (941) 627-4192

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

FILED
10 JUN 23 PM 4:00
RECEIVED

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Southwest FL Pool Guard LLC

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

3. The Florida document/registration number of this limited liability company is:
L08000038010

4. I, DAVID W WHITE, hereby resign as a MANAGER / owner - 50%
(Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

David W White
Signature of Resigning Member, Managing Member or Manager

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