

L08000072075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

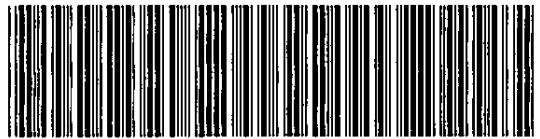
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/22/09--01028--026 **85.00

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09 JUN 22 PM 1:33
CLERK OF STATE
TALLAHASSEE, FLORIDA

NA Design
Theirs
6-24-09

NOVAK LAW OFFICES

ATTORNEYS AT LAW

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June 18, 2009

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

**Re: Resignation of Registered Agent for Florida LLC
Earth Movers MW, LLC**

Dear Corporation Section:

Enclosed please find resignation of registered agent for the above referenced entity for filing with the Florida Department of State, Division of Corporations.

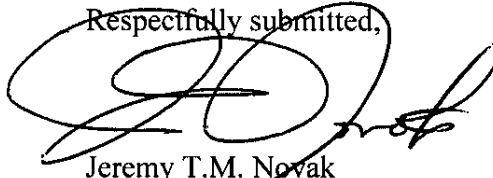
Kindly return all correspondence, filed papers, information requests and/or further inquiries concerning this matter to our offices at:

Novak Law Offices, PLLC
c/o Jeremy T.M. Novak, Esq.
209 7th Street
Port St. Joe, Florida 32456
(850) 229-4700

Additionally, please find the check in the amount of eighty five dollars (\$85) for the required Filing Fee.

Thank you for your anticipated cooperation and assistance in this regard.

Respectfully submitted,



Jeremy T.M. Novak
Novak Law Offices, PLLC

Encl.

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,

Jeremy T.M. Novak, hereby resigns as
(Name of Registered Agent)

Registered Agent for Earth Movers MW, LLC

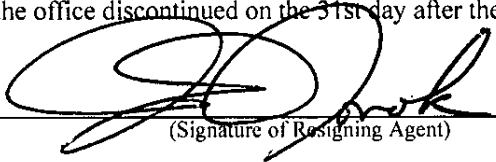
(Name of Limited Liability Company)

L08000072075

(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)

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	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

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DIVISION OF STATE