

LO8 000073094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

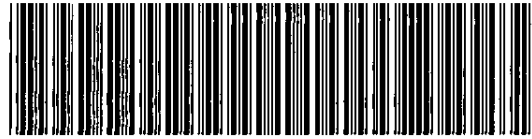
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100201856651

04/18/11--01028--003 **55.00

FILED

2011 APR 18 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

APR 19 2011

EXAMINER

LO8-73094

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Creepy Creatures Pest And Wildlife Busters, 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:

Dawn Sundland
(Contact Person)

Creepy Creatures Pest and Wildlife Busters, LLC
(Firm/Company)

12113 Marblehead Dr.
(Address)

Tampa, Florida 33626
(City/State and Zip Code)

For further information concerning this matter, please call:

Atle Sundland at (813) 843-4264
(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

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

2011 APR 18 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



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: Creepy Creatures Pest & Wildlife Busters 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:
2859171

4. I, Dustan Showers, hereby resign as a Vice-President
(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.



Signature of Resigning Member, Managing Member or Manager

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

2011 APR 18 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED