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SECRETARY OF STATE

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COVER LETTER

Division of Corporations			
SUBJECT: SEO EXPERT MANKETING UN Nâme of Limited Liability Company DOCUMENT NUMBER: LO 8000 88240	رر		
	— 	hmitta	.d
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee for filing.	are st	JOHHUE	;U
Please return all correspondence concerning this matter to the following:			
Armando Martinez Name of Person			
Name of Firm/Company	Ħ.co.	23	
1680 Michigan Avenue P-4		WH BHOY	7
Wilhui H. 33(39) City/State and Zip Code	ARY OF SH	-3 PH	ILED
E-mail address: (to be used for future annual report notification)		: 3 9	
For further information concerning this matter, please call:			
Area Code & Daytime Telephone Number	<u>\(\lambda \) \(\lambda \) \</u>		

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

TO: Amendment Section

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

STREET ADDRESS:

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

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,	
GUSTAUD A. ECHEUEICRICA, hereby resigns as	
Registered Agent for SEO EXPERTIBLE LANDSCAPING SERVICE LLC.	
Name of Limited Liability Company	
LO80000 88240 Document Number, if known	
A copy of this resignation was mailed to the abeve listed limited lightly company at its last known address.	
The agency is terminated and the office discontinued on the 3 st day after the date on which this statement is filed.	
If signing on behalf of an entity: Signature of Resigning Agent Signature of Resigning Agent Signature of Resigning Agent	<u> </u>
Capacity Capacity	ED

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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