L08000 101891

(Requ	estor's Name)			
(Addre	ess)			
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(City/S	State/Zip/Phone	e #)		
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SECRETARY OF STATE

Ja voloilao

COVER LETTER

Division of Corporations					
SUBJECT: LeBel Landscaping LLC (Name of Limited Liability Company)					
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to:					
John-Paul C. LeBel (Contact Person)					
Lebel Landscaping LLC (Firm/Company)					
12217 Grovewood Avenue					
Thonotosassa, F/ 33592 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Tohn-laul LeBel at (813), 479 -8686 (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 \$\sum \text{S55 Filing Fee & Certified Copy}\$					

Registration Section

TO:

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as it ap	ppears on the records of the Flor	rida Dep	artme	nt
of State is:	ebel Landscoping	LLC			<u>-</u> •
2. The Florida docu	ment/registration number assign	ned to this limited liability comp	any is:		
L0860	00107891				
	mber/manager withdrew/resigne		5/-	7/0	0
4. 1. <u>Fric</u> (Print N	McGrthy ame of Person Besigning)	_, hereby withdraw/resign as a	, .	.'	
Mainten	ance Manager. (Print Title)				
	bility company and affirm the lir	mited liability company has been	n notifie	d of n	ŋy
resignation in wr	iting.		CRETA	020 AUG 10	
Signature of Di	ssociating Member of Resigning	g Manager	RY OF IASSEI		
•	\$25.00 (Required) \$30.00 (Optional)		STATE E. FL	PH 3: 34	O