L09 000021348

| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | <u> </u> |
| (Ad | dress) | |
| — (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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T. CLINE

OCT - 3 2012

EXAMINER



September 26, 2012

EDILMA VILLANUEVA POLLOCK 7218 MICHIGAN ISLE ROAD LAKE WORTH, FL 33467

SUBJECT: VERDANTQUEST, LLC. Ref. Number: L09000027348

We have received your document for VERDANTQUEST, LLC. and your check(s) totaling \$35.00. 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) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 612A00024031

SECRETARY OF STATE

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|---|
| SUBJECT: Verdant Quest, LL | |
| (Name of Limited Liability Con | ipany) |
| The enclosed member, managing member or manager resigniling. | nation and fee(s) are submitted for |
| Please return all correspondence concerning this matter to: | |
| 7218 Hichigan Isle Rd, Lake | North, FL 33467 |
| (Contact Person) | |
| Verdant Quest, LLC | |
| (Firm/Company) | • |
| 7218 Hichigan Isle Rd | |
| (Address) | • |
| Lake Worth, FL 33467 | |
| (City/State and Zip Code) | • |
| For further information concerning this matter, please call: | |
| | 368-6808 |
| (Name of Contact Person) (Area Code | & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$\$ | Department of State for: 55 Filing Fee & Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| - | P.O. Box 6327 ≅≅ № 1 |
| 2661 Executive Center Circle Tallahassee, Florida 32301 | Tallahassee, Florida 32314 |
| CR2E079 (5/06) | ORIDA ÷ |



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 of State is: | limited liability company as Verdant Quest, L | it appears on the records <u>LC</u> | of the Florida Department |
|--|--|--|-------------------------------------|
| | ility company was organized FLorida | under the laws of: | |
| 109000 | ument/registration number of | | |
| 4. I, Edilmav (Print N | Illanueva Pollock Jame of Person Resigning) | , hereby resign as a | Manager and Treasurer (Prini Title) |
| of this limited lia resignation in wr | bility company and affirm the | e limited liability compar | ny has been notified of my |
| ·Efleri | /amp? | | |
| | igning Member, Managing M | lember or Manager | may |
| | \$25.00 (Required) \$30.00 (Optional) | | ZHZOCT -2 M 3 SECRETARY OF STA |

CR2E079 (5/06)