

L09000105104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

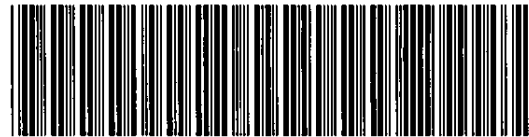
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000240340500

10/04/12--01017--011 **35.00

2012 OCT 30 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

OCT 31 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2012

DAVID JOHNSON
2221 SW 18TH TERRACE
CAPE CORAL, FL 33991

SUBJECT: DIXIE LAWN CARE, LLC
Ref. Number: L09000105104

We have received your document for DIXIE LAWN CARE, 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 212A00025091

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 OCT 30 AM 11:34

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DIXIE LAWN CARE 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:

DAVID JOHNSON
(Contact Person)

DIXIE LAWN CARE LLC
(Firm/Company)

2221 SW 18TH TERR
(Address)

CAPE CORAL, FL 33991
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID JOHNSON at (239) 707-5832
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 OCT 30 AM 11:34

FILED



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

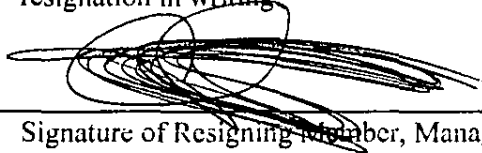
**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: DIXIE LAWN CARE 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:
L09000105104

4. I, CHRISTOPHER DEBONO, hereby resign as a MEMBER
(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)

FILED
2012 OCT 30 AM 11:34
SECRET
TALLAHASSEE
FLORIDA