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(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
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COVER LETTER

TO:	Registration Section	
	Division of Corporations	
SUBJ	JECT: Allen Aquatics LLC	
	(Name of L	imited Liability Company)
The enfiling.		or manager resignation and fee(s) are submitted for
Please	e return all correspondence concerni	ng this matter to:
Mich	neal Allen	
	(Contact Person)	
Aller	n Aquatics LLC	
	(Firm/Company)	
3120	0 NW 75th Terrace	
	(Address)	
Gain	nesville, FL 32606	
	(City/State and Zip Code)	
For fu	rther information concerning this ma	atter, please call:
Mich	neal Allen	at (_ 352) 505-5646
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclos	sed please find a check made payable	e to the Florida Department of State for:
	\$25 Filing Fee	\$55 Filing Fee &
		Certified Copy
	ET/COURIER ADDRESS:	MAILING ADDRESS:
_	tration Section	Registration Section
	on of Corporations	Division of Corporations
	n Building	P.O. Box 6327
	Executive Center Circle	Tallahassee, Florida 32314
ı allah	assee, Florida 32301	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	e limited liability company as en Aquatics LLC	it appears on the records	of the Florida D	epartn	nent —·
2. This limited liab	pility company was organized	l under the laws of:			
3. The Florida doc L1100000	ument/registration number of	f this limited liability com	pany is:		
4. I, Rebecca I	Harty-Allen Jame of Person Resigning)	, hereby resign as a	Managing M	lemb	<u>e</u> r
•	bility company and affirm th	e limited liability compar	•		my
Lebeur	I Harty allon		nnog Tra		
	igning Member, Managing M	iember or Manager	JEUKETA VLLAHAS	TT MAY -	- Claimen
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		KY OF STAI	9 PH 3:3	