

L13000128194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

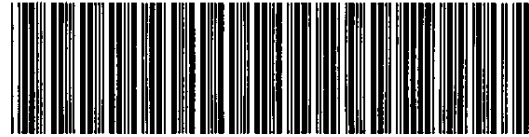
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Disg of nbr

Office Use Only



000256602180

02/24/14--01049--019 **25.00

FILED
14 FEB 24 PM 1:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 FEB 25 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Garner Energy Now, 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:

Michael Attardi

(Contact Person)

(Firm/Company)

1330 Whitney Isles Drive

(Address)

Windermere, FL 34786

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Attardi

(Name of Contact Person)

at (**848**) **218-9009**

(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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OR DISSOCIATION OF MEMBER, 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: Garner Energy Now, LLC

2. The Florida document/registration number of this limited liability company is:
L13000128194

3. The date this member withdrew or will withdraw is: 2/10/2014

4. I, Michael Attardi, hereby resign as a Mgr 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 or Dissociating Manager, Member

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
14 FEB 24 PM 1:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA