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	<u> </u>		
	(Requestor's Name)		
(Address)			
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	P WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of	Status	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

MAR 27 2015 T. CARTER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: ROAD HAZARD PROTECTION, LLC				
(Name of Limited Lia	ability Company)			
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.			
Please return all correspondence concerning this m	atter to:			
MIKE LANGILLE				
(Contact Person)				
ROAD HAZARD PROTECTION, LLC				
(Firm/Company)				
618 GOLF COURSE DRIVE				
(Address)				
FORT WALTON BEACH, FL 32547				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
ALEX C. LANGILLE at (797-5537			
(Name of Contact Person) (A	area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee				
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			

CR2E079 (2/14)



FILED SECRETARY OF STATE TALLAHASSEE. FLORIDA

15 MAR 23 PM 2: 50

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)

	limited liability company as D HAZARD PROTECTIO	it appears on the records of the Florida Department N, LLC
	iment/registration number as	ssigned to this limited liability company is:
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is:
4. I, ALEX C. LANGILLE (Print Name of Person Resigning)		
(Print N	ame of Person Resigning)	
	(Print Title)	
of this limited lia resignation in wr		e limited liability company has been notified of my
Alex C.	Pargill	
Signature of Di	seociating Member or Resig	ning Manager
	\$25.00 (Required) \$30.00 (Optional)	