L1700000 8537

(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:





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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: GREEN LAWN SERVICE LLC	
(Name of Limited	Liability Company)
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
DOMINGUEZ, ANTONIA	
(Contact Person)	
GREEN LAWN SERVICE LLC	70
(Firm/Company)	TACK BY THE CAN BE CAN
29 SIOUX LANE	R-8
(Address)	——————————————————————————————————————
LAKE WORTH, FL 33462	2024 HAR -8 PH 2: 01 SECRETARY OF STATE SEALLY HASSEE, FL
(City/State and Zip Code)	
For further information concerning this matter, p	
DOMINGUEZ, ANTONIA	561 803-5414 ()
	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	e Florida Department of State for:
	\$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)



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)

		it appears on the records of the Florida Departm	ent
of State is:	EN LAWN SERVICE LLC		·
2. The Florida doc L17000008537	ument/registration number as	issigned to this limited liability company is:	
DOMINGUEZ	ANTONIA		
(Print N	lame of Person Resigning)	hereby withdraw/resign as a) -
of this limited lia resignation in wr	iting.	e limited liability company has been notified of t	my
	issociating Member or Resign \$25.00 (Required) \$30.00 (Optional)	ning Manager	