KZ1000033413

(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:	~	stration Section ion of Corporations					
SUBJ	ECT:	SPARTAN SOLAR LLC					
		(Name of Limited Liability Company)					
The er	nclosed	l member, resignation or disso	ciation and fee(s) are submitted for filing.			
Please	return	all correspondence concerning	g this matter to:	:			
ALEX	SMITH						
		(Contact Person)	-	_			
SPART	ΓAN SO	LAR LLC					
		(Firm/Company)		_			
1010 S	TRATE	IMORE DRIVE					
	· · ·	(Address)		_			
ORLA	NDO. F	LORIDA 32806					
		(City/State and Zip Code)		<u></u>			
For fu	rther ir	nformation concerning this ma	tter, please call:	:			
ALEX	SMITH		561 at (339-9140			
	(N	ame of Contact Person)	(Area Code	e & Daytime Telephone Number)			
	sed ple 5 Filing	ase find a check made payable g Fee		Department of State for: g Fee & Certified Copy			
	Regis Divis P.O.	ng Address: Stration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 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)

	• • •	s it appears on the records of the	·
		ssigned to this limited liability co	
MATTHEWLENT	•	signed or will withdraw/resign is:, hereby withdraw/resign as	
MEMBER (P)	rint Title)		
resignation in writi	- · · · · · · · · · · · · · · · · · · ·	ne limited liability company has l	
Signature of Diss Filing Fee: Certified Copy:		gning Manager	ETT (TE)