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COVER LETTER

TO: Registration Division of	Section Corporations				
SUBJECT: Do	Name of Forei	TRUCTORS ign Limited Liability C	ompany)		
Dear Sir or Madam:					
The enclosed withdra	wal and fee(s) are submitted	for filing.			
Please return all corr	espondence concerning this m	natter to the following:			
Cindy	Bettag Smi (Name of Person)	th.			
Doye	(Firm/Company)	tors LC			
<u>PO</u>	Box 127 (Address)			2015 FI	~
Mari	(City/State and Zip Code)	47556		EB 24 PM	Santa a
For further information	on concerning this matter, ple Hay Smith ume of Person)	at (<u></u> \$12)	937 - 0016 Daytime Telephone Number)	M 2: 01 FLORIDA	STATE OF THE STATE
Registration Division of Clifton Buil 2661 Execu	Corporations	Registra Division P.O. Bo	ation Section of Corporations ox 6327 ssee, Florida 32314		
Enclosed is a check	for the following amount:				
\$25 Filing Fee	S30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

DOYENNE CONSTRUCTORS, LLC (Name of limited liability company)		***	_
(Name of limited liability company)			
(Jurisdiction of its organization)			_
(Jurisdiction of its organization)			
(Date registered with Florida Department of State)			-
(Date registered with Florida Department of State)			
M0900002922			_
(Florida Document Number)			_
This limited liability company is withdrawing its certificate of authority in this state.			
(Signature of authorized representative) Cynthia 5. Bettag - Smith (Typed or printed name of signee)	SCORETARY OF STAT	2015 FEB 24 PM 2: 0	

Filing Fee: \$25.00