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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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TO:

Registration Section

Tallahassee, Florida 32301

CR2E079 (2/14)

Division of Corporations FLORIDA DEMOLITION AND CONSTRUCTION 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: TONY GMEINDER (Contact Person) (Firm/Company) 26315 83RD AVENUE EAST (Address) MYAKKA CITY, FL 34251 (City/State and Zip Code) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) TONY GMEINDER (Name of Contact Person) 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: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314



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)

1. The name of the	e limited liability company a	s it appears on the records of the Florida Department
of State is:	PRIDA DEMOLITION AND	CONSTRUCTION LLC
2. The Florida doc L1600011846		ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:
4. I, CONNOR GAMSO (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print?	Name of Person Resigning)	
MGR		
	(Print Title)	
of this limited lia resignation in wr		ne limited liability company has been notified of my
Signature of D	issociating Member or Resig	ming Manager
	\$25.00 (Required)	# 88
Certified Copy:	\$30.00 (Optional)	

SECRETARY OF STATE OF STATE OF CORPORATION