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(Ri	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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### COVER LETTER

TO: **Registration Section Division of Corporations** 

GEN-EX BUILDERS, LLC. SUBJECT:

(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:

HENRY LOUDEN (Contact Person)

GEN-EX BUILDERS, U.C.

(Firm/Company)

500 5 Federal Hivy #1691 (Address)

Hallandale, FL 33008

For further information concerning this matter, please call:

MIN Louden at (<u>957</u>) <u>557</u>0821 (Name of Contact Person) (Area Code & Daytime Telephone Number)

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:

**Registration Section** Division of Corporations **Clifton Building** 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)

#### MAILING ADDRESS:

**Registration Section Division of Corporations** P.O. Box 6327 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 limited liability company as it appears on the records of the Florida Departmen

of State is: FLORIDA 2. The Florida document/registration number assigned to this limited liability company is 60200000541 3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_\_, hereby withdraw/resign as a 4. I. (Print Name of Person Resigning) MGR

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

resignation in writing.		
Signature of D	ssociating Member or Resigning Manager	
Filing Fee: Certified Copy:	S25.00 (Required) \$30.00 (Optional)	