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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: EVERGLADES LUMBER	AND BUILDING	SUPPLIES LLC
	mited Liability Compa	uny)
The enclosed member, resignation or disso	ciation and fee(s) a	are submitted for filing.
Please return all correspondence concerning	g this matter to:	
George M. Lopez		
(Contact Person)		
South Dade Builders Inc		
(Firm/Company)		
9233 S.W. 67TH STREET		
(Address)		
MIAMI, FL 33173		
(City/State and Zip Code)		
For further information concerning this mat	tter, please call:	
George Lopez	at (786)	236-5471 Daytime Telephone Number)
(Name of Contact Person)	(Area Code &	Daytime Telephone Number)
Enclosed please find a check made payable	to the Florida Dep	partment of State for:
■ \$25 Filing Fee		ee & 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)

		it appears on the records of the BUILDING SUPPLIES LLC	-
2. The Florida doc	_	signed to this limited liability c	ompany is:
4. I, SOUTH DAD	DE BUILDERS, INC.	igned or will withdraw/resign is, hereby withdraw/resign a	
Member	lame of Person Resigning) (Print Title)		
	bility company and affirm the	e limited liability company has	been notified of my
Signature of Di	ssociating Member or Resign	ning Manager	FILED 16 NOV 21 PN 1: 41 DIVISION OF CONSTRACTO
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		BH I I I I