10300052251

(Requestor's Name)
(Address)
(Address)
(nucless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100304848501

10/26/17--01015--007

****25,00**

2017 OCT 26 PM 4: 19

K. SALY OCT 27 2017

COVER LETTER

	stration Section sion of Corporations			
SUBJECT:	JORGE GARCIA ALUMINUM & FENCE, LLC.			
SUBJECT	(Name of Limi	ited Liability Co	ompany)	
The enclosed	d member, resignation or dissocia	ation and fee	(s) are submitted for filing.	
Please return	all correspondence concerning	this matter to	X	
JORGE GA	ARCIA			
	(Contact Person)		_	
JORGE GA	ARCIA ALUMINUM & FENCE	, LLC.		
	(Firm/Company)			
4360 ROY	AL PALM BEACH BLVD		·	
	(Address)		_	
ROYAL PA	ALM BEACH, FL 33411			
	(City/State and Zip Code)			
For further i	nformation concerning this matte	er, please call	l:	
JORGE GA	ARCIA	561	202-7478	
(8	Name of Contact Person)		de & Daytime Telephone Number)	
Enclosed plo \$25 Filing	ease find a check made payable to g Fee		Department of State for: ng Fee & Certified Copy	
	COURIER ADDRESS:		MAILING ADDRESS:	
Registration			Registration Section	
	Corporations		Division of Corporations P.O. Box 6327	
Clifton Buil	aing tive Center Circle		Tallahassee, Florida 32314	
	, Florida 32301		, change, contract of the	

CR2E079 (2/14)

2017 OCT 26 PH 4: 19



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)

The name of the limited liability company as it appears on the records of the Florida Department of State is:	
The Florida document/registration number assigned to this limited liability company is: L03000052251	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 23 - 24. I. MARGARITO MARTINEZ 4. I. (Print Name of Person Resigning) ANALYSES	Ø '
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	
Signature of Dissociating Member or Resigning Manager	

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)