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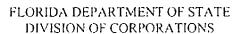
SECRETARY OF STATE
TALLARY OF STATE

O Shawic -- Nov 1 8 2021

COVER LETTER

TO: Registration Division of	n Section Corporations			
McCa SUBJECT:	ll Construction LLC			
	(Name o	f Limited Lia	bility Co	ompany)
The enclosed mem	ber, resignation or dis	ssociation a	and fee((s) are submitted for filing.
Please return all co	orrespondence concer	ning this m	atter to	:
Brent McCall				
	(Contact Person)			_
McCall Construction I	LLC			
	(Firm/Company)			_
9278 127th Drive				
-	(Address)			
Live Oak, FL 32060				
·	(City/State and Zip Code)			_
For further informa	ation concerning this	matter, ple	ase call	:
Brent McCall		3) at (36	364-5924
(Name of	f Contact Person)	(A	rea Cod	e & Daytime Telephone Number)
Enclosed please fir	nd a check made paya	ible to the l	Florida	Department of State for:
□ \$25 Filing Fee		∀ \$	55 Filin	ng Fee & Certified Copy
Mailing Add				Street Address:
Registratio				Registration Section Division of Corporations
P.O. Box 6	Corporations			The Centre of Tallahassee
	e, FL 32314			2415 N. Monroe Street, Suite 810
				Tallahassee, FL 32303







DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it appears on the records of the Florida Department
of State is:	Construction LLC
2. The Florida docu	nment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
4. I. Carl B McCail Jr	, hereby withdraw/resign as a ame of Person Resigning)
(Print N	ame of Person Resigning)
Manager Member	
-	Print Title)
of this limited liab resignation in wr	oility company and affirm the limited liability company has been notified of my ting.
fort Bn	ssociating Member or Resigning Manager
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)