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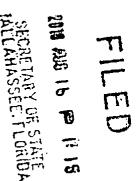
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7. LEMEUX

## **COVER LETTER**

TO: Registration Section Division of Corporations PRO RESTORATION AND CONSTRUCTION, 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: HEATHER L DANEALS (Contact Person) PRO RESTORATION AND CONSTRUCTION (Firm/Company) 18440 PAULSON DR., STE A (Address) PORT CHARLOTTE, FL 33954 (City/State and Zip Code) For further information concerning this matter, please call: HEATHER L DANEALS 313-8420 941 (Area Code & Davtime Telephone Number) (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

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



## 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)

	RESTORATION AND CO		of the Florida Department
2. The Florida doc L0500002389	ument/registration number as 96	ssigned to this limited liab	ility company is:
4. I, SASHA DON	ember/manager withdrew/res	igned or will withdraw/res	• •
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability company	y has been notified of my
95	312		SEC.
Signature of D	ssociating Member or Resign	ning Manager	BETARN AHASSI
~	\$25.00 (Required) \$30.00 (Optional)		TOR STATE