

LOS000053447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

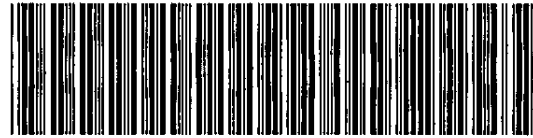
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000264228320

09/18/14--01002--021 **25.00

14 SEP 18 PM 4:13
RECEIVED
FBI - LOS ANGELES

Res/migkm
@ 9.25.14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL CRAFT CONSTRUCTION LLC
(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:

NEIL GERSHKON

(Contact Person)

ALLCRAFT CONSTRUCTION LLC

(Firm/Company)

118 DONNA Circle

(Address)

SANFORD, FL 32773

(City/State and Zip Code)

For further information concerning this matter, please call:

Neil Gershkon

(Name of Contact Person)

at (407) 928-6552

(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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



14 SEP 18 PM 4:10

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 Department

of State is: ALLCRAFT CONSTRUCTION LLC

2. The Florida document/registration number assigned to this limited liability company is:

LD5000053447

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/15/2014

4. I, CAROL GERSHKON, hereby withdraw/resign as a
(Print Name of Person Resigning)

Mgr / Vice President
(Print Title)

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

x Carol Gershkon

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)