# U05000055279

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(Ac	ddress)	<u></u>	-
(Ac	ddress)		_
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(Ĉi	ty/State/Zip/Phone #	)	_
PICK-UP	☐ WAIT	MAIL	
(Ві	usiness Entity Name	)	-
(Do	ocument Number)		-
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Special Instructions to	Filing Officer:		
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#### **COVER LETTER**

SUBJECT:	BENNY	CA HELA (Name of Limited	CONCRE	TE SURF	ACES, L	-66	
<del></del>		(Name of Limited	Liability Company	)			
Dear Sir or Mad	am:				-		
The enclosed Re	signation of Mer	nber, Managing Mo	ember or Manag	er and fee(s) are	submitted for fi	iling.	
Please return all	correspondence	concerning this ma	tter to the follow	ring:			
BENN	IY CAH	-LA					
	(Name of	Person)				0	
BENNY	CAHELA	CONCRET	E SURF	aces, L	LC E	OS SEP 14	
	(Firm/Con	npany)		2 1,7		I F	프
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	(City/State and	l Zip Code)			=	· · · · · · · · · · · · · · · · · · ·	_
For further infor	mation concernit	ng this matter, pleas	se call:				
BENNY	CAHELI (Name of Person	<b>t</b> at	(Area Code & I	494-01 Daytime Telephor	ne Number)		

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

\$55 Filling Fee &

Certified Copy

CR2E079 (8/05)

STREET/COURIER ADDRESS:

Enclosed is a check for the following amount:

\$25 Filing Fee

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301\_

TO:

Registration Section Division of Corporations



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,	MARY E CAHELA, hereby resign as MERM (Title)	_	
of_	BENNY CAHELA CONCRETE SURFACES, LLC (Limited Liability Company)	_,	
a lin	nited liability company organized under the laws of the State of FLORIDA	<b>_</b>	· .= =
and	affirm that the limited liability company has been notified in writing of the resignation	05 SEP	
	(Signature of resigning manager, managing member or member)	P 14 PM 12: 1	

### FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314