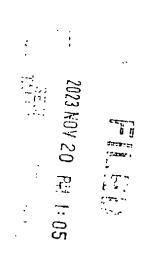
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(Requestor's Name)				
(Address)				
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PICK-UP WAIT	MAIL			
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COVER LETTER

	-	tration Section ion of Corporations		
SUBJE	CT:	S&S Plumbing LLC		
		(Name of Lin	nited Liability Co	ompany)
The end	losed	member, resignation or dissoc	iation and fee((s) are submitted for filing.
Please r	eturn	all correspondence concerning	this matter to	:
Christopl	her J. S	Shipley, Esq., MBA, CPA		
		(Contact Person)		_
Shipley I	_aw Fi	rm		
		(Firm/Company)		_
20110 U.	.S. Hig	hway 441, Suite A		
		(Address)		_
Mount D	ora, Fl	orida 32757-6901		
		(City/State and Zip Code)		_
For furt	her in	formation concerning this mat	ter, please call:	:
Christopl	her J. S	Shipley, Esq., MBA, CPA	352 at (383-3397
	(N	ame of Contact Person)		e & Daytime Telephone Number)
Enclose	-	ase find a check made payable Fee		Department of State for: ig Fee & Certified Copy
	Regis Divis P.O. I	g Address: tration Section ion of Corporations 3ox 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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)

	limited liability company as it	t appears on the records of the Florida	Department	
2. The Florida docu 105000104521	ment/registration number assi	igned to this limited liability company	is:	
Michael C. Cavith	-	med or will withdraw/resign is: , hereby withdraw/resign as a	6, 2016	
of this limited liab resignation in wri		limited liability company has been no	2023 NOV 20 PH 1: 05	e o j