

LO6 0000002274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

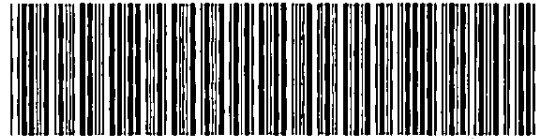
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 FEB 11 AM 7:55

○ SIMMONS

MAR 31 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEXGEN FRAMING SYSTEM 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:

JOHN LUCE
(Contact Person)

BLUEDEVIL 83 LLC
(Firm/Company)

120 JUPITER KEY RD 2ND Floor
(Address)

JUPITER FL 33477
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN LUCE at (917) 318-0400
(Name of Contact Person) (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

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



2021 FEB 11 AM 7:55

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: NEXGEN FRAMING SYSTEM LLC

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

LOG000002274

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/30/20

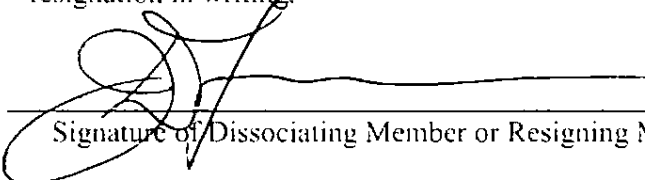
4. I, JOHN DAVID LUCE, hereby withdraw/resign as a

(Print Name of Person Resigning)

MANAGER and MEMBER ~~MEMBER~~

(Print Title)

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



Signature of Dissociating Member or Resigning Manager

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