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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: ROOFOREVER LI	LC	
(Na	ame of Limited Liability Cor	npany)
The enclosed member, resignation of	or dissociation and fee(s	) are submitted for filing.
Please return all correspondence cor	ncerning this matter to:	
JORGE A CARVAJAL		
(Contact Person)		_
ROOFOREVER LLC		مريد
(Firm/Company)		- , , , , , , , , , , , , , , , , , , ,
1866 SHOWER TREE WAY		· · · · · · · · · · · · · · · · · · ·
(Address)		D
WELLINGTON FL 33414		ي. پ
(City/State and Zip C	lode)	(,
For further information concerning	this matter, please call:	
JORGE CARVAJAL	561 at (	644-7490
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed please find a check made \$25 Filing Fee		Department of State for: 3 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

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	s it appears on the records of	of the Flori	da Dep	partment
2. The Florida doc-	ument/registration number a 36	ssigned to this limited liab	ility compa	ny is:	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/res	sign is: SE	P 30, :	2018
4. I. JORGE CARVAJAL , hereby withdr (Print Name of Person Resigning)					
MEMBER					
-	(Print Title)				
of this limited lia resignation in wr	bility company and affirm the iting.	ne limited liability company	y has been	notitic	d of my
Signature of Di	ssociating Member or Resig	gning Manager			
_	\$25.00 (Required) \$30.00 (Optional)			₹*40C115 A 9:	