406000097786

(Req	uestor's Name)	
(Addi	ress)	
(Add	ress)	
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
(Busi	iness Entity Nar ument Number) Certificates	ne)

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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 31, 2016

LAMBERT O'NEILL CONSTRUCTION LLC JAMES L SMITH 4075 TAMIMI TRL., STE. 6 PORT CHARLOTTE, FL 33952

SUBJECT: LAMBERT O'NEILL CONSTRUCTION LLC

Ref. Number: L06000097786

We have received your document for LAMBERT O'NEILL CONSTRUCTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 516A00023357

War 24 a

COVER LETTER

Division of Corporations			
SUBJECT: Lambert O'Neill Construction	LLC		
(Name of Limited Liability Company)			
The enclosed member, resignation or dissociat	ion and fee(s) are submitted for filing.		
Please return all correspondence concerning th	is matter to:		
James L. Smith			
(Contact Person)			
Lambert O'Neill Construcion LLC			
(Firm/Company)			
4075 Tamiami Trl. Ste 6			
(Address)			
Port Charlotte, FL 33952			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
James L. Smith	941-249- 5030 at ()		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to ☐ \$25 Filing Fee	the Florida Department of State for: \$\square\$ \$\square\$ \$\square\$ \$\square\$ 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 it appears on the records of the Florida Department bert O'Neill Construction LLC
2. The Florida doc L0600009778	ument/registration number assigned to this limited liability company is: 6
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I,	
MGRM	
	(Print Title)
of this limited lia resignation in wi	ability company and affirm the limited liability company has been notified of my iting.
Ignature of D	issociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)