L07000008336

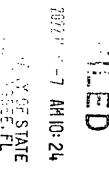
(Requestor's Name)					
(Address)					
(4.11)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(0.000,000 2,000)					
(Document Number)					
Certified Copies Certificates of Status	_				
Special Instructions to Filing Officer:					

Office Use Only



400396919244

11/07/22--01030--006 **55.00



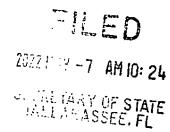
COVER LETTER

•	stration Section sion of Corporations		
SUBJECT:	Tiger Concrete and Screed, LLC		
	(Name of Limit	ed Liability Con	mpany)
The enclosed	d member, resignation or dissocia	tion and fee(s	s) are submitted for filing.
Please return	all correspondence concerning the	nis matter to:	
Sheylla Aceve	s		
	(Contact Person)		
Tiger Concrete	e and Screed, LLC		
-	(Firm/Company)		-
4215 S. Pipkir	ı Rd.		_
	(Address)		
Lakeland, Flor	rida 33811		
	(City/State and Zip Code)		_
For further i	nformation concerning this matter	, please call:	
Sheylla Aceve	s	813 at (997-9153
(1)	lame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed ple ☐ \$25 Filin	ease find a check made payable to		Department of State for: g Fee & Certified Copy
/ Regi Divi: P.O.	stration Section sion of Corporations Box 6327 shassee, 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)







My Commission Expires_

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it Concrete and Screed, LLC	appears on th	ne records of the Florida Department			
2. The Florida docu L07000008336	ument/registration number assi	gned to this li 	imited liability company is:			
3. The date this me	mber/manager withdrew/resign	ned or will wi	ithdraw/resign is:			
Jesus Aceves		, hereby withdraw/resign as a				
(Print N	(Print Name of Person Resigning)					
Member						
·	(Print Title)					
resignation in wr		(a)	ty company has been notified of my			
Filing Fee:	\$25.00 (Required)					
Certified Copy:	\$30.00 (Optional)					
CR2E079 (2/14)	CAISTINA E. Notary Public - Stat Commission # Hi My Comm. Expires A Bonded through National	te of Florida H 267913 Aay 24, 2026	State of Florida County of DDLK The foregoing instrument was acknowledged before me via physical presence (OR Donline notarizations this UTM day of November 20 22. By ICHI AUNI Personally known Y OR produced identification Typo of identification produced NO FARY NAME HERE, Notary Public			