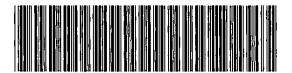
107000056664

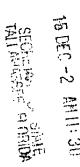
(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phon	e #)		
PłCK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Do	ocument Number)			
Certified Copies Certificates of Status				
Special instructions to	Filing Officer:			

Office Use Only



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K.SALY EXAMINER DEC - 2 2015

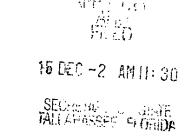
COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	Wallace	Electric	01	Marion	County	4
	(Name	of Limited Liability (Company)			
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.						
Please return all co	orrespondence conce	rning this matter t	o:			
Dian	(Contact Person)	-				
Wallac	e Electr (Firm/Company)	ric of Ma	si'm	cty		
3515 Sew 24th Are Rul (Address)						
Ocale	(City/State and Zip Code)	3447/				
For further information	ation concerning this	s matter, please ca	11:			
Diam. (Name o	f Contact Person)	at (<u>3 5</u> (Area Co	2) <u>(</u>) de & Day	772 - 4 Viime Telephone N	Y(08)	
Enclosed please fire \$25 Filing Fee	nd a check made pay			ment of State for: & Certified Copy		
STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, Florid CR2E079 (2/14)	on rations enter Circle la 32301	Light of	Regis Divis P.O. Talla	LING ADDRES stration Section ion of Corporatio Box 6327 hassee, Florida 33	ons 2314	





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: _	Walface Electric of Marion County LLC
2. The Florida o	locument/registration number assigned to this limited liability company is:
L07	000056664
3. The date this	member/manager withdrew/resigned or will withdraw/resign is: $11 - 30 - 15$
4. I, <u>Craja</u> (Pri	nt Name of Person Resigning), hereby withdraw/resign as a
<u>Men</u>	nber (Print Title)
of this limited resignation in	liability company and affirm the limited liability company has been notified of my writing.
	7RWM
Signature 6	Dissociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)
Common Copy.	φυνίου (Optional)