L07000061382

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





200268969262

02/03/15--01029--010 **25.00

15 FEB -3 PH 3: 57
SECRETARY OF STATE
FALLANASSEF, FLORIDA

T. LEMIEUX

COVER LETTER

TO: Registration Section

Tallahassee, Florida 32301

CR2E079 (2/14)

Division of Corporations F. I. C. CONSTRUCTION & ROOFING 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: CHARLES GENTRY (Contact Person) **ACCOUNTING AND TAX ASSOCIATES** (Firm/Company) 1903 N HERCULES AVE (Address) CLEARWATER, FL 33763 (City/State and Zip Code) For further information concerning this matter, please call: **CHARLES GENTRY** (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee **MAILING ADDRESS:** STREET/COURIER ADDRESS: **Registration Section** Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle



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 the Flor	ida Department	
2. The Florida doct L0700006138	· ·	ssigned to this limited liability compa	any is:	
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:	/19/2015	
4. I, MITRI DADO	OUSH Jame of Person Resigning)	, hereby withdraw/resign as a		
MGRM	(Print Title)			
of this limited lia resignation in wr		he limited liability company has been	notified of my	
	Smile		15 FEB SECRET TALLAHA	
Signature of Di	issociating Member or Resig	gning Manager	-3 ARY SSEI	7; =]
	\$25.00 (Required) \$30.00 (Optional)		PM 3: 58 Of State E. Florid,	J ,