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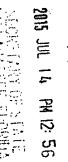
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(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			





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\$ COVER LETTERY

Registration Section

TO:

Division of Corporations DUNN CONTRACTING LLC SUBJECT: (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: JAMES DUNN (Contact Person) **DUNN CONTRACTING LLC** (Firm/Company) 5580 63RD WAY NORTH (Address) ST PETERSBURG FL 33709 (City/State and Zip Code) For further information concerning this matter, please call: JAMES DUNN (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations**

P.O. Box 6327

Tallahassee, Florida 32314

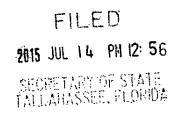
CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301





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)

	mited liability company as CONTRACTING LLC	it appears on the records of the Florida Department
2. The Florida docum L09000055049	nent/registration number as:	signed to this limited liability company is:
3. The date this mem	ber/manager withdrew/resi	gned or will withdraw/resign is: 07/01/2015
4. 1. JEFFREY L ENGLAND JR (Print Name of Person Resigning)		
(Print Nai AUTHORIZED		
(F	rint Tule)	
resignation in writi	• •	e limited liability company has been notified of my
Signature of Diss	sociating Member of Resign	ing manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	