L090000111170

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status

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04/05/10--01035--002 **35.00

Special Instructions to Filing Officer:

L. SELLERS

APR 28 2010

EXAMINER

Office Use Only

SECRETARY OF STATE
TALLAHASSEE, FLORID

COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: PISACANO CONSTRUCTION LLC
(Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: (INAL CORAN (Contact Person) PISACANO CONSTRUCTION, LLC
(Firm/Company) 15925 NW 52 AVE MIAMI GARDENS FL 33014
(City/State and Zin Code) For further information concerning this matter, please call: (Name of Contact Person) at (954) 940-1902 (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee & \$25 Filing Fee Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (5/06)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



April 7, 2010

UNAL COBAN 510 NW 84 AVENUE, #419 PLANTATION, FL 33324

SUBJECT: PISACANO CONSTRUCTION, LLC.

Ref. Number: L09000071670

We have received your document for PISACANO 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Letter Number: 810A00008577

Leslie Sellers Regulatory Specialist II

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		as it appears on the records of the Florida Department
2. This limited liab	ility company was organiz	·
3. The Florida docu	iment/registration number	of this limited liability company is:
409000	0071670	·
4. I, <u>() // 4. /</u> (Print N	CORAN ame of Person Resigning)	hereby resign as a MGRM (Print Title)
of this limited lial resignation in wr		the limited liability company has been notified of my
	Thank	
Signature of Resi	gning Member, Managin	Member or Manager
Filing Fee:	\$25.00 (Required)	
	\$30.00 (Optional)	

CR2E079 (5/06)

FILE LU

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SECRETARY OF STATE
TALLAHASSEE, FLORID