

L11000041672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

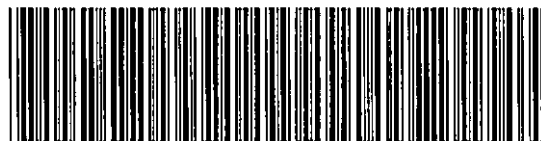
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18 SEP 21 AM 8:52
CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 27, 2018

JENNIFER ODOM
P.O. BOX 1207
SAN ANTONIO, FL 33576

SUBJECT: C&N FOUNDATION TECHNOLOGIES, LLC
Ref. Number: L11000041672

We have received your document for C&N FOUNDATION TECHNOLOGIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please refer to chapter 605.0216(1) of the Florida Statutes.

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) 245-6939.

Agnes Lunt
Regulatory Specialist III

Letter Number: 018A00017790

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C&N FOUNDATION TECHNOLOGIES, 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:

JENNIFER ODOM

(Contact Person)

C&N FOUNDATION TECHNOLOGIES, LLC

(Firm/Company)

PO BOX 1207

(Address)

SAN ANTONIO, FL 33576

(City/State and Zip Code)

For further information concerning this matter, please call:

JENNIFER ODOM

(Name of Contact Person)

352 588-0910
at (_____) _____

(Area Code & Daytime Telephone Number)

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:

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

MAILING ADDRESS:

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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C+N Foundation Technologies, 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:

Jennifer Odom
(Contact Person)

C+N Foundation Technologies, LLC
(Firm/Company)

30427 Commerce Drive
(Address)

San Antonio, FL 33576
(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Odom at (352) 583-4606
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee –

☐ \$55 Filing Fee & Certified Copy

Check sent with original
paperwork.

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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



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)

FILED
18 SEP 21 AM 8:52
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department

of State is: C & N Foundation Technologies, LLC

2. The Florida document/registration number assigned to this limited liability company is:

L110000041672

3. The date this member/manager withdrew/resigned or will withdraw/resign is: January 1, 2018

4. I, Warren Neumann, hereby withdraw/resign as a
(Print Name of Person Resigning)

CEO

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my
resignation in writing.

Warren Neumann

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)