L11000041687

(Re	questor's Name)			
(Add	dress)			
(Add	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu:	siness Entity Nar	me)		
(Do	cument Number)			
Certified Copies	Certificates of Status			
Special Instructions to	Filing Officer:			
:		;		

Office Use Only



400361645784

03/12/21--01016--022 **55.00

2021 HAR 12 AH 7: 41

D BRUCE MAY 1 9 2021

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Accuracy Elemented (Name of Limited	ectric, LLC Liability Company)
The enclosed member, resignation or dissociation	on and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Edgar Pedreros (Contact Person)	
According Electr	rc, LLC
4296 Raffia Palm	
Naples, F1 34119 (City/State and Zip Code)	
For further information concerning this matter,	please call:
Edgar ledreres at (Name of Contact Person)	(239) 398-2136 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th ☐ \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 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)

1. The name of the	limited liability comp	any as it appears on the	e records of the F	lorida Depa	rtment
of State is:	Accuracy	Electric.	UC		·
2. The Florida doc	ument/registration nun	nber assigned to this lir	mited liability cor	mpany is:	
L 110	0004168	7			
3. The date this me	ember/manager withdre	ew/resigned or will wit	hdraw/resign is:	03-08	3-5051
		√oS , hereby wi			
_ Marag	Print Title)			2021 FA	
of this limited lia	bility company and aff	firm the limited liabilit	v company has b		
resignation in w	iting.			- 5 2	
				<u></u>	a]
-Signature of D	issociating Member or	Resigning Manager	- 	AH 7:44	.e.J
Filing Fee:	\$25.00 (Required)				
•	\$30.00 (Ontional)				