## L11000124789

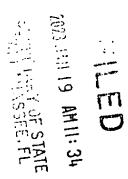
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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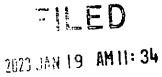
01/19/23--01010--091 \*\*25.00



## COVER LETTER

TO:	~	stration Section sion of Corporations		
SUBJ	ECT:	Go Underground Utilities, LLC		
		(Name of Limite	d Liability Cor	mpany)
The er	nclosed	d member, resignation or dissociat	ion and fee(s	s) are submitted for filing.
Please	return	all correspondence concerning th	is matter to:	
Lynn V	Vudtke			
		(Contact Person)		_
Swaine	:, Harris	& Wohl, P.A.		
		(Firm/Company)		_
401 Da	ıl Hall B	Boulevard		
		(Address)		_
Lake P	lacid, Fl	1. 33852		
		(City/State and Zip Code)	-	_
For fu	rther is	nformation concerning this matter.	please call:	
Bert J.	Harris,	111	863 at (	465.2811
	(N	ame of Contact Person)	(Area Code	_)
	sed ple 5 Filing	ease find a check made payable to g Fee		Department of State for: g Fee & Certified Copy
	Regis Divis P.O.	ng Address: stration Section sion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303





FLORIDA DEPARTMENT OF STATE AND ASSEE, FL 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 li	mited liability company as it appears on the records of the Florida Department
of State is: Go Und	erground Utilities, LLC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: 12/31/2022
Member/Manager	
$\overline{P}$	rint Title)
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of mying.
Lugeni	a S. Tillman
Signature of Diss	sociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)