## L12 0000 89228

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Evolution Construction LLC			
(Name of Limi	ited Liability Con	ipany)	
The enclosed member, resignation or dissocia	ation and fee(s	) are submitted for filing.	
Please return all correspondence concerning	this matter to:		
Kenneth Kump			
(Contact Person)		-	
(Firm/Company)		-	
13533 Island Rd		_	
(Address)			
Fort Myers FL 33905			
(City/State and Zip Code)		-	
For further information concerning this matter, please call:			
Kenneth	239 at (	810-8437	
(Name of Contact Person)	- \-	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:  \$\Pi\$ \$\\$25\$ 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	

CR2E079 (2/14)



## 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 company as it of State is:  Evolution Construction LLC	appears on the records of the Florida Department
2. The Florida document/registration number assig L12000089228	gned to this limited liability company is:
3. The date this member/manager withdrew/resign  4. I, Kenneth Kump  (Print Name of Person Resigning)  MGR  (Print Title)  of this limited liability company and affirm the ligresignation in writing.  Signature of Dissociating Member or Resigning	, hereby withdraw/resign as a

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)