## 113000014936

(Requestor's Name)
(Requestors 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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LCC Member Resign

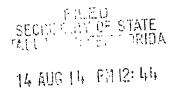
AUG 21 2014 T. CARTER

## COVER LETTER

	ration Section on of Corporations			
SUBJECT:	GENESIS STRUCTURAL CO	NSULTING,	LLC	
	(Name of Limit	ed Liability Com	pany)	
The enclosed	member, resignation or dissociat	tion and fee(s)	are submitted for filing.	
Please return	all correspondence concerning the	nis matter to:		
Michael Star	nton			
	(Contact Person)		•	
Stanton Cronin Law Group, PL				
	(Firm/Company)		•	
6944 W. Line	ebaugh Ave.			
	(Address)		•	
Tampa, FL 3	33625			
	(City/State and Zip Code)		-	
For further in	formation concerning this matter	r, please call:		
Michael Sta	nton	813	444-0155	
(Na	ime of Contact Person)	(Area Code	& Daytime Telephone Number)	
Enclosed plea  \$25 Filing	ase find a check made payable to Fee		repartment of State for: Fee & Certified Copy	
	OURIER ADDRESS:		MAILING ADDRESS:	
Registration S			Registration Section	
Division of C			Division of Corporations	
Clifton Build	•		P.O. Box 6327	
_	ve Center Circle		Tallahassee, Florida 32314	
Tallahassee, l	rionda 32301			

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 appears on the records of the Florida Department
of State is: GENESIS STRUCTURAL CONSULTING, LLC
2. The Florida document/registration number assigned to this limited liability company is:
L13000014936
3. The date this member/manager withdrew/resigned or will withdraw/resign is:
4. I, Jonathan Correa, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGR
(Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)