## L13000139493

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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S. YOUNG

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## **COVER LETTER**

Registration Section

Tallahassee, Florida 32301

CR2E079 (2/14)

TO:

Division of Corporations JOSS Contracting LLC **SUBJECT:** (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: Shawn Seiler (Contact Person) JOSS Contracting (Firm/Company) 11849 S US Highway 41 (Address) Gibsonton, Fl. 33534 (City/State and Zip Code) For further information concerning this matter, please call: Stephanie Warthen (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle 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)

1. The name of the	limited liability company as it ap	opears on the records of the Florida	Departn	nent
of State is:	S CONTRACTING			·
2. The Florida doc	ument/registration number assign	ed to this limited liability company	is:	
L1300013949	3	_•		
3. The date this me	ember/manager withdrew/resigne	d or will withdraw/resign is:	2016	
4. I, SALVATORE VENTIMIGLIA , hereby withdraw/resign as a (Print Name of Person Resigning)		hereby withdraw/resign as a		
(Print N	lame of Person Resigning)	_, notesy williarawitesign as a		
MGRM				
	(Print Title)			
of this limited lia resignation in wr		nited liability company has been not	ified of	my
	-		36	TATE SE
Ales			AUG	NAC
Signature of Dissociating Member or Resigning Manager		3-8	TAR	
			P	
Filing Fee:	\$25.00 (Required)		PM 12: 34	
Certified Copy:	\$30.00 (Optional)		34	