## L14000151835

(Red	questor's Name)			
(Address)				
(Address)				
(City	y/State/Zip/Phon	e #)		
PICK-UP	MAIT WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
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## COVER LETTER

A.

_	stration Section sion of Corporations		
SUBJECT:	American Pipeline Construc	ction LLC	
	(Name of Lir	nited Liability Con	mpany)
The enclosed	d member, resignation or dissoc	ciation and fee(s	s) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
Andres Lur	na		
	(Contact Person)		_
APC			
	(Firm/Company)		_
PO Box 55	8081		_
	(Address)		
Miami, FL	33255		
	(City/State and Zip Code)		_
For further in	nformation concerning this mat	ter, please call:	
Andres Lur	na	786	236-5019
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed ple	ease find a check made payable g Fee		Department of State for: g Fee & Certified Copy
Registration Division of C Clifton Build 2661 Execut	Corporations		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	e limited liability company a	s it appears on the records of the Florida Department
of State is:	erican Pipeline Constructi	on LLC
2. The Florida doc L1400015182	•	ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is: Nov. 16, 2022
Andres Luna		hereby withdraw/resign as a
(Print)	Name of Person Resigning)	, hereby withdraw/resign as a
Registered A	gent/Managing Partner	
	(Print Title)	
resignation in w	1	ne limited liability company has been notified of my
_	\$25.00 (Required) \$30.00 (Optional)	TALL: