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(Re	questor's Name)	
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SERVICE SERVICES TO THE PROPERTY OF THE PR



COVER LETTER

TO: Registration Section Division of Corporations Premier Electrical Solutions, 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: Michael Winterton (Contact Person) Premier Electrical Solutions, LLC (Firm/Company) P.O. Box 1389 (Address) Sorrento, FL 32776 (City/State and Zip Code) For further information concerning this matter, please call: Michael Winterton (Name of Contact Person) (Area Code & Davtime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: ☐ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy 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 Tallahassee, Florida 32301

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DEVISION 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 app	cears on the records of the Florida	Department	
of State is: Pr	emier Electrical	Solutions	<u> </u>	
2. The Florida docu	-	d to this limited liability company	ist	
3. The date this me	mber/manager withdrew/resigned	or will withdraw/resign is: 11	<u> </u>	
4. I. Timoths	ume of Person Resigning)	, hereby withdraw/resign as a		
Managin	Print Title)			
of this limited lial resignation in writer		ited liability company has been no	NOV 15	FILE
Signature of Di	ssociating Member or Resigning	Manager	E 32:	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		98 A	