

L15 000069648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

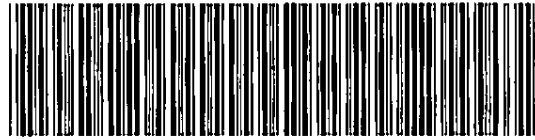
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800355580818

11/30/20--01018- -015 \*\*25.00

2020 DEC -1 PM 1:20

MISS / Reson  
H/D the sign  
in at

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HURRICANE STEEL BUILDINGS LLC  
\_\_\_\_\_  
(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:

David J. Kim, Esq.

\_\_\_\_\_  
(Contact Person)

David J. Kim, PA

\_\_\_\_\_  
(Firm/Company)

2200 NW Corporate Blvd., Suite 410

\_\_\_\_\_  
(Address)

Boca Raton, FL 33431

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

David J. Kim

at ( 561 ) 484-7729

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

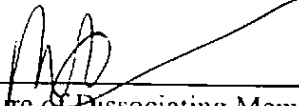


FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**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: HURRICANE STEEL BUILDINGS LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L15000069648
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 05/12/2015
4. I, MICHAEL BUNNICELLI, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
VICE PRESIDENT  
*(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)

2020 DEC -1 PM 1:20