LIS 000 126 729

| (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: | | |
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| | | |

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations Scionti Construction Group 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: Joseph A Scionti (Contact Person) Scionti Construction Group LLC (Firm/Company) PO BOX 452700 (Address) Miami Fl 3245 (City/State and Zip Code) For further information concerning this matter, please call: Joseph A Scionti 561 2460411 (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)

| The name of the limited liability company as it Scionti Construction Group LLC | t appears on the records of the Florida Department |
|--|--|
| of State is: | |
| 2. The Florida document/registration number ass | igned to this limited liability company is: |
| | 01/01/2024 |
| The date this member/manager withdrew/resig Ann Maria Ferrao | |
| | , hereby withdraw/resign as a z c |
| (Print Name of Person Resigning) MGR CEO President | , hereby withdraw/resign as an INT No. 123 |
| (Print Title) | |
| resignation in writing. | limited liability company has been notified of my |
| Signature of Dissociating Member or Resigni | ng Manager |

Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)