

LL5000 166 229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

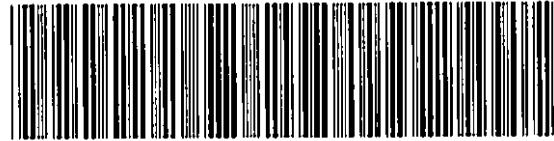
(Document Number)

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

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STATE OF MASSACHUSETTS  
20 FEB -6 PM 6:29

Dissociation  
of member

FEB 18 2020  
D CUSHING

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ELEC3PHASE ELECTRICAL CONTRACTORS 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:

JACQUELINE ACEVEDO

(Contact Person)

JASASTSA BUSINESS SERVICES LLC

(Firm/Company)

22095 US HWY 19

(Address)

CLEARWATER, FL 33765

(City/State and Zip Code)

For further information concerning this matter, please call:

JACQUELINE ACEVEDO

at ( 727 ) 645-2856

(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

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

2013-06-PM 6:29

LLC  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 14, 2020

JACQUELINE ACEVEDO  
JASASTSA BUSINESS SERVICES LLC  
22095 US HWY 19  
CLEARWATER, FL 33765

SUBJECT: ELEC3PHASE ELECTRICAL CONTRACTORS LLC  
Ref. Number: L15000166229

We have received your document for ELEC3PHASE ELECTRICAL CONTRACTORS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Stephanie Sandoval must sign the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 220A00001045



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: ELEC3PHASE ELECTRICAL CONTRACTORS LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L15000166229

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/13/2019

4. I, STEPHANIE SANDOVAL, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MGRM

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

*Stephanie Sandoval*

Signature of Dissociating Member or Resigning Manager

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS  
20 FEB - 4 PM 6:29

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