L15000199716

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Rusiness Entity Name)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
J DEILUTS						
FEB - 9 1974						

Office Use Only



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COVER LETTER

TO: Regi	stration Section		
Divis	sion of Corporations		
SUBJECT:	Ethos Building Group LLC		
		Limited Liability Co	ompany)
The enclosed	d member, resignation or dis	sociation and fee((s) are submitted for filing.
Please return	n all correspondence concern	ing this matter to	:
Jason Lester			
	(Contact Person)		_
Ethos Building	g Group LLC		
· · · · · ·	(Firm/Company)		weight.
15628 63rd PI	. N		
	(Address)	**	_
Loxahatchee I	i.		
•	(City/State and Zip Code)		_
For further i	nformation concerning this r	natter, please call	:
Jason Lester		513 at (312-4893
(1)	Name of Contact Person)		le & Daytime Telephone Number)
Enclosed ple ■ \$25 Filin	ease find a check made payal ig Fee		Department of State for: ng Fee & Certified Copy
	ing Address:		Street Address:
_	stration Section sion of Corporations		Registration Section Division of Corporations
	Box 6327		The Centre of Tallahassee
Talla	ahassee, FL 32314		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)

	limited liability company as Building Group LLC	s it appears on the records of	the Florida Department	
2. The Florida doc L15000199716	ument/registration number a	ssigned to this limited liabilit	ty company is:	
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resig	n is:	
4. I, Jason Lester (Print N	lame of Person Resigning)	, hereby withdraw/resign as a		
Manager				
	(Print Title)			
of this limited lia resignation in wr		he limited liability company ł		
Signature of D	issociating Member or Resig	gning Manager	PIL SECRETARI SECRETARI	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		HIG PH I	