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(Requestor's Name)	_
(Address)	_
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(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
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(Business Entity Name)	
(Document Number)	_
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Division of Corporations SUBJECT: One GA Coatings & Construction, UC The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: JOHN SANIDAKIS
(Contact Person) Director Coatings & Construction, UC Tompon ave. Suite Tarpon Springs, PC, 34689 (City/State and Zin Code) For further information concerning this matter, please call: (Name of Contact Person) at (757) 940.7423

(Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for:

\$\sim \frac{1}{2}\$\$ Filing Fee & Certified Copy

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Registration Section

TO:

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee

Street Address:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



2022 OCT 21 AM 8: 3

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: Onega Costings 3 Construction, UC
2. The Florida document/registration number assigned to this limited liability company is:
<u>LIMMO12519</u>
3. The date this member/manager withdrew/resigned or will withdraw/resign is: January 1,2022
4. I, Aresilans Frances, hereby withdraw/resign as a (Print Name of Person Resigning)
Member (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
le 2
Signature of Dissociating Member or Resigning Manager

Certified Copy:

Filing Fee:

\$25.00 (Required) \$30.00 (Optional)