

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000113320 3)))



H200001133203ABCM

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : I20120000055  
Phone : (407)898-1757  
Fax Number : (407)897-5336

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: info@abkcorp.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PROVISION P.C.W CONSTRUCTION LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

RECEIVED

2020 APR 24 PM 12:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 APR 24 AM 10:01



April 20, 2020

FLORIDA DEPARTMENT OF STATE

Division of Corporations

PROVISION P.C.W CONSTRUCTION LLC  
1521 S KIRKMAN RD  
APT 2003  
ORLANDO, FL 32811US

SUBJECT: PROVISION P.C.W CONSTRUCTION LLC  
REF: L16000014092

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please provide the date the member/manager withdrew/resigned or will withdraw/resign on.

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.

Terri J Schroeder  
Regulatory Specialist III

FAX Aud. #: H20000113320  
Letter Number: 820A00008166

COVER LETTER

H200001133203

TO: Registration Section  
Division of Corporations

SUBJECT: PROVISION P.C.W CONSTRUCTION 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:

Leticia Santos

(Contact Person)

ACCOUNT BOOKKEEPING CORP

(Firm/Company)

3301 CONROY ROAD APT 309

(Address)

ORLANDO, FL 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

Leticia Santos

407

255-9468

at ( )

(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

H200001133203



H200001133203

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: PROVISION P.C.W CONSTRUCTION LLC
2. The Florida document/registration number assigned to this limited liability company is:  
LI6000014092
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 04/24/2020
4. I, PATRICIA S JENKINS, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
PATRICIA S JENKINS  
*(Print Title)*

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

A handwritten signature in black ink, appearing to read "P. Jenkins", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

2020 APR 24 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H200001133203