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(R	(equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	city/State/Zip/Phone #))		
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(B	Business Entity Name)			
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SECNETARY OF STATE
PALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PALACE CONSTUCTION GROUP UC (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:
SCOTT E. SMITH (Contact Person)
PALACE CONSTRUCTION GROUP LLC (Firm/Company)
PALNCE CONSTRUCTION GROUP LLC (Firm/Company) 23339 DUCHESS AVE. (Address)
PORT CHARLOTTE, FL 33954 (City/State and Zip Code)
For further information concerning this matter, please call:
SCOTT E. SMITH at (631) 741-2328 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\square\$ \$\s

STREET/COURIER ADDRESS:

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

CR2E079 (2/14)

MAILING ADDRESS:

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



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 Flor	ida De _l	partme	ent
of State is:) ALACE CONSTRUC	CTION GROUP LLC				- ·
2. The Florida docu	ıment/registration number	assigned to this limited liab	ility comp	any is:		
_L16000	040232	·				
3. The date this me	mber/manager withdrew/n	esigned or will withdraw/res	sign is: <u>C</u> C	<u>6 - 15</u>	-2018	3
4. I, BRAD (Print N	S. COX ame of Person Resigning)	, hereby withdraw/re	sign as a			
	D MEMBER. (Print Title)					
of this limited lial resignation in wri		the limited liability compan	y has been	notifie	d of m	ıy
1	0511	2	<u></u>	SE SE	5 5	
Signature of Di	ssociating Member or Res	igning Manager	;	CAHA LAHA	JU _K	
_	\$25.00 (Required) \$30.00 (Optional)		: : :	SSEE, FLORID	l 8 ¥ 8: l	产配口