L160000768666

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
	WAIT			
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				



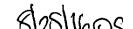


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08/24/16--01016--014 **25.06

FILED

SECRETARY OF STATE
SECRETARY OF STATE



COVER LETTER

Division of Corporations	
SUBJECT: Onega Bullbers, LL (Name of Limited Liability Co	ompany)
The enclosed member, resignation or dissociation and fee	(s) are submitted for filing.
Please return all correspondence concerning this matter to):
JONATHAN Burleigh (Contact Person)	
Onega 1 Builders, 220 (Firm/Company)	<u>. </u>
8710 West Hillsborough Av	<u>18</u> 355 = = = = = = = = = = = = = = = = = =
Tanpa, FC 33615 (City/State and Zip Code)	FILE! CRETARYO LLAHASSEE
For further information concerning this matter, please call	
Name of Contact Person) at (813) (Area Code)	1 167 - 2250 = 5 de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida 2 \$25 Filing Fee \$55 Filing	Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle Tallahassee, Florida 32301

TO: Registration Section



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 recor	rds of the Florida Departmen
of State is:(Omega 1 Bui	Ders, LLC	<u> </u>
2. The Florida docu	ument/registration number as	ssigned to this limited l	liability company is:
_L1600	00076866	 ·	
3. The date this me	mber/manager withdrew/resi	igned or will withdraw	/resign is: <u>5/1/2016</u>
4. I, <u>SCOT</u> (Print N	R. Ferland Jame of Person Resigning)	, hereby withdraw	v/resign as a
	NAGEY (Print Title)		
of this limited lial resignation in wr		e limited liability comp	pany has been notified of my
Scott R 1	Eland		SECRE
Signature of Di	ssociating Member or Resign	ning Manager	FILE MUG 24 ECRETARY OF LLAHASSEE,
_	\$25.00 (Required) \$30.00 (Optional)		P STATE
Certified Copy:	\$50.00 (Optional)		