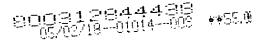
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(Requestor's Name)				
(Address)				
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## **COVER LETTER**

TO:

CR2E079 (2/14)

Registration Section

Division of Corporations JACKSON STREET CONSTRUCTION LLC **SUBJECT:** (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: DIANA BLAD (Contact Person) DIANA CRAIG LLC (Firm/Company) 230 FORREST AVE (Address) **COCOA FL 32922** (City/State and Zip Code) For further information concerning this matter, please call: DIANA BLAD (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: ■ \$55 Filing Fee & Certified Copy ☐ \$25 Filing Fee STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



## 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 KSON STREET CONSTR	s it appears on the records of the	Florida Department
2. The Florida docu L16000114800	<del>-</del>	assigned to this limited liability c	ompany is:
4. I. ROY ESTES  (Print No. 1)  MANAGER  of this limited liab resignation in wri	ame of Person Resigning)  (Print Title)  bility company and affirm the	signed or will withdraw/resign is, hereby withdraw/resign a he limited liability company has gning Manager	MY-2 PH 2:4 MASSEC.FLOWID
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		