L11000011

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

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TILED 30 OF STATE SECRETARY OF STATE

S Warren

SEP 15 2016

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: Design to Build LLC		
(Name of Limited	I Liability Con	npany)
The enclosed member, resignation or dissociation	on and fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to:	
Orlando Tamariz		
(Contact Person)		_
(Firm/Company)		_
3700 Capital Circle SE Apt 823		
(Address)		-
Tallahassee, Florida, 32311		
(City/State and Zip Code)		-
For further information concerning this matter,	please call:	
Orlando Tamariz	786	266-0386
(Name of Contact Person)	- (& Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee		Pepartment of State for: Fee & Certified Copy
•		
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle		Tallahassee, Florida 32314
Tallahassee, Florida 32301		Tulianassee, Florida 52517

CR2E079 (2/14)



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 gn to Buld LLC		ds of the Florida Department		
2. The Florida doct L1600015477	ument/registration number a	ssigned to this limited li	ability company is:		
3. The date this me	mber/manager withdrew/res	signed or will withdraw/	resign is:		
4. I, Sergio Parro	Mo Tame of Person Resigning)	, hereby withdraw	, hereby withdraw/resign as a		
MGR					
	(Print Title)				
of this limited lia resignation in wr		ne limited liability comp	any has been notified of my		
Sugir	Pariono				
	ssociating Member or Resig	ning Manager			
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)				
Certified Copy:	\$30.00 (Optional)		TIL TIL		

CR2E079 (2/14)