

L16000155908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

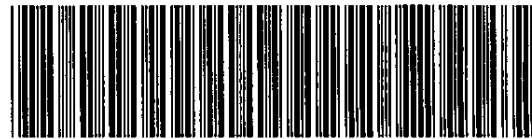
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



300291661283

10/28/16--01006--025 **25.00

FILED
16 OCT 28 AM 10:49
OFFICE OF STATE
TALLAHASSEE, FLORIDA

OCT 31 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Precision Fencing, 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:

Michael Nunez

(Contact Person)

Precision Fencing, LLC

(Firm/Company)

3244 Stonewyck Street

(Address)

Orlando, FL. 32824

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Nunez

at 954 734-3986

(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

STREET/COURIER ADDRESS:

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

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 Florida Department of State is: Precision Fencing, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000155908

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/20/2016

4. I, Manuel Fernandez, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGR

(Print Title)

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

X

[Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)