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TO: Registration Section Division of Corporations

CR2E079 (2/14)

SUBJECT: Sunshine State Construction Group (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:
Joshua Schwier (Contact Person)
Unique Edge LLC (FirmCompany)
801 Cornwall Rd
Sanford FL 32773 (City/State and Zip Code)
For further information concerning this matter, please call:
Toshua Schwier at (407) 970-7083 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\square\$\$ \$\frac{1}{2}\$\$ \$\
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: <u>Su</u>	nshine State Construction Group LLC
2. The Florida docu	ument/registration number assigned to this limited liability company is:
L16000	192658
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: $5-1-18$
4.1, Joshu	a Schwier, hereby withdraw/resign as a lame of Person Resigning)
manag	Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified extra titing.
A	issociating Member or Resigning Manager
Signature of Di	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)