

L16000 195423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

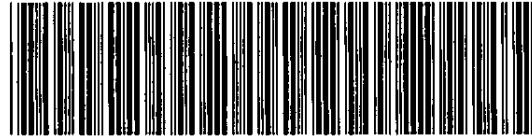
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 APR 27 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Patriots Craft Carpentry 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:

Shawna S. Rosa
(Contact Person)

Patriots Craft Carpentry
(Firm/Company)

1749 Strathmore Circle
(Address)

MH. Dade FL 32757
(City/State and Zip Code)

407-925-5146
Shawna S. Rosa

For further information concerning this matter, please call:

Shawna S. Rosa at 352-988-3399
(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

CR2E079 (2/14)

Shawna + I are getting a divorce. I don't have a new address for him. Please remove "1749 Strathmore Circle" as the address



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: Patriots Craft Carpentry

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

L16000195423

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4/23/18

4. I, Ashley S. Rosa, hereby withdraw/resign as a

(Print Name of Person Resigning)

MGR MGRM

(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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2018 APR 27 14:12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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