116000 203266

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
	,	
(Cit	ty/State/Zip/Phone	e #)
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PICK-UP	WAIT	MAIL
	siness Entity Nan	no)
00)	Siness Chilly Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BUILD FAST LLC (Name of Limited)	Liability Company)
The enclosed member, resignation or dissociation	on and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to:
OLIVER BECERRA (Contact Person)	
Build Fast LL	<u>C</u>
2654 SW 25th Terr	
MIAMI, FL 33133 (City/State and Zip Code)	
For further information concerning this matter, p	olease call:
Oliver Becerra at (Name of Contact Person)	(786) 356-5760 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th ■ \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 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	timited liability company as i	t appears on the record	s of the Florida Depart	.ment
of State is:	BUILD FAST LLC			
2. The Florida doc	ument/registration number ass	igned to this limited lia	ability company is:	
_L16000	203266			
3. The date this me	ember/manager withdrew/resig	gned or will withdraw/r	resign is: <u>12/13/20</u> 1	19
	r Becerra Name of Person Resigning)	, hereby withdraw/	resign as a	
MAN	AGER (Print Title)			
of this limited lia resignation in w	ability company and affirm the	limited liability compa	any has been notified on SECRETAIN TALLAINN	f my
Signature of D	vissociating Manbet or Resigni	ing Manager	100	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Ontional)		AM IO: 39	المريا