## L16000217592

(Requestor's Name)
(Address)
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#### **COVER LETTER**

<u> </u>	of Corporations		
SUBJECT: Sir	nms Builders LLC		
300017C1,	(Name o	of Limited Liability C	Company)
The enclosed me	ember, resignation or di	issociation and fee	e(s) are submitted for filing.
Please return all	correspondence concer	ning this matter to	o:
Tony Simms			
	(Contact Person)		<del></del>
Simms Builders LI	LC		
	(Firm/Company)	<del></del>	<del></del>
2825 Business Cen	nter Blvd. Suite D10		
	(Address)		<del></del>
Melbourne, FL 329	940		
	(City/State and Zip Code)	<del></del>	· <del></del>
For further infor	mation concerning this	matter, please cal	I:
Tony Simms		3 <b>2</b> 1	7952801
(Name	of Contact Person)		de & Daytime Telephone Number)
Enclosed please	find a check made paya	able to the Florida	Department of State for:
□ \$25 Filling Fe	e	≣ \$55 Fili	ng Fee & Certified Copy
Mailing A	ddress:		Street Address:
	tion Section		Registration Section
	of Corporations		Division of Corporations
P.O. Box	see. FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
rananas	SCC. FL 32314		Tallahassee, FL 32303



# FILED 2021 AUG 12 AM II: 14 SECRETARY OF STATE FALLAHASSEE, FLORES

### 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: Simm	s Builders LLC
2. The Florida docu L16000217592	iment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: July 26, 2021
Christopher D. S.	
Manager	
	Print Title)
of this limited lia resignation in wr	pility company and affirm the limited liability company has been notified of my ting.
Signature of Di	ssociating Member or Resigning Manager
•	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)