117000020455

(Requ	estor's Name)		
(Addre	ess)	 .	
(Addr	ess)		
(City/s	State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	
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COVER LETTER

-	istration Section ision of Corporations			
SUBJECT	E&S Sunshine Tile and Floo	oring		
Sebole	(Name of Limited Liability Company)			
The enclose	ed member, resignation or dissoc	iation and fee(s) are submitted for filing.	
Please retur	m all correspondence concerning	this matter to:		
Stephen b	lume			
	(Contact Person)		_	
E&S Suns	hine Tile and Flooring			
	(Firm/Company)		_	
2820 39th	ave ne			
**************************************	(Address)	1,11,11	<u></u>	
Naples FL	.,34120			
	(City/State and Zip Code)		PALA	
For further	information concerning this mat	ter, please call:		
Stephen E	Blume	239 at (246-1300	
(Name of Contact Person)		e & Daytime Telephone Number)	
Enclosed p ■ \$25 Filin	lease find a check made payable ng Fee		Department of State for: g Fee & Certified Copy	
	COURIER ADDRESS:		MAILING ADDRESS:	
Registration of	n Section Corporations		Registration Section Division of Corporations	
Clifton Bui	lding		P.O. Box 6327	
	tive Center Circle Florida 32301		Tallahassee, Florida 32314	

CR2E079 (2/14)



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)

Εŧ	he limited liability company as it appears &S Sunshine Tile and Flooring LLC.	on the records of the Florida Department
2. The Florida d L17000020	ocument/registration number assigned to t 455	his limited liability company is:
Emilio Baz	member/manager withdrew/resigned or with an an and the state of Person Resigning)	<u>-</u>
of this limited	(Print Title) liability company and affirm the limited li	ability company has been notified of my
resignation in		
Signature of Filing Fee:	Dissociating Member or Resigning Mana \$25.00 (Required)	ger G

Certified Copy:

\$30.00 (Optional)