

L17000152715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

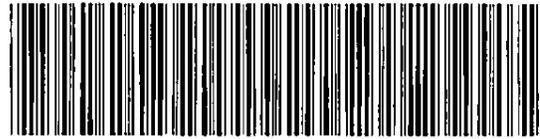
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/18/23--01019--005 **55.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2023 SEP 18 PM 1:33

FILED



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
2023 SEP 18 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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
Capital Builders USA LLC
of State is: _____

2. The Florida document/registration number assigned to this limited liability company is:
1.17000152715

3. The date this member/manager withdrew/resigned or will withdraw/resign is: _____
Benito R. Otano

09/13/2023

4. I, _____, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager with 5% of Ownership giving it to Nelson Otano

(Print Title)

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

Signature of Dissociating Member or Resigning Manager

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