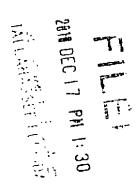
1170000207233

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
La la sula Assam
Office Use Only



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11/21/18--01008--032 **35.00



DEC 18 2018



December 3, 2018

CHESTER M RHOADES CHESTER M. RHOADES CPA 4281 HEARTHSTONE DRIVE SARASOTA, FL 34238

SUBJECT: SRQ CABINET REFACING & COUNTERTOPS LLC

Ref. Number: L17000207233

We have received your document for SRQ CABINET REFACING & COUNTERTOPS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Corporate Records Supervisor

2010 DEC 17 PH

Letter Number: 918A00024744

COVER LETTER

Division of Corporations	
SUBJECT: SRQ Cabinet Refacing + C	ountertops, LLC Company)
The enclosed member, resignation or dissociation and for	ee(s) are submitted for filing.
Please return all correspondence concerning this matter	to:
Chester M Rhoades (Contact Person)	
(Firm/Company)	
4281 Hearthstone Drive	MIN DEC 17 PM 1: 30
Sarasota, Fl 34238 (City/State and Zip Code)	——————————————————————————————————————
For further information concerning this matter, please c	
Chester M Rhoades at (937) (Name of Contact Person) (Area C	750-5250 Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid \$25 Filing Fee \$55 Fi	la Department of State for: ling Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)

Tallahassee, Florida 32301

TO: Registration Section



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	imited liability company as it appears on	the records of the Florida Department
of State is: _SR	Q Cabinet Refacing + C	auntertops, LLC
2. The Florida docu	ment/registration number assigned to this	s limited liability company is:
L17000	207233	
3. The date this men	nber/manager withdrew/resigned or will	withdraw/resign is: $12/8/2017$
4.1. Andrew	TRhodes , hereby	
Member	Print Title)	2818 DEC
of this limited liab resignation in wri	oility company and affirm the limited liab	• • • • • • • • • • • • • • • • • • • •
Signature of Di	Ssociating Member or Resigning Manage	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	