

**L17000220742**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**2017 DEC 14 PM 5:45**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**K SALY**  
**DEC 15 2017**

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EC FLOOR COVERING LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

FERNANDA SILVA

(Contact Person)

A&F FINANCIAL LLC

(Firm/Company)

4851 W HILLSBORO BLVD, STE#A2

(Address)

COCONUT CREEK, FL 33073

(City/State and Zip Code)

For further information concerning this matter, please call:

FERNANDA SILVA

at ( 754 ) 205-9371

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED  
2017 DEC 14 PM 5:45  
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 of State is: EC FLOOR COVERING LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L17000220742

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/07/2017

4. I, CHARLES WIBSTER ALVES VIEIRA, hereby withdraw/resign as a  
(Print Name of Person Resigning)

AUTHORIZED MEMBER

(Print Title)

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

x Charles Wibster Alves Vieira

Signature of Dissociating Member or Resigning Manager