

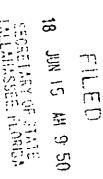
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COVER LETTER

(Name of Limited Liability Company)

Division of Corporations

SUBJECT: SUPERVISION & CONSTRUCTION LLC.

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

Please return all correspondence concerning this matter to:

GEOVANYS DIAZ, MENESES			
(Contact Person)			
(Firm/Congraty)			
/			
835 NW 45TH AVET APT 8			
(Address)			
MIANI FL 33126			
(City/State and Zip Code)			

For further information concerning this matter, please call:

GEOVANYS DIAZ MENESES at (305) 967 3758

(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

\$\Pi\$ \$25 Filing Fee \$\Pi\$ \$25 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

CR2E079 (2/14)

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER ROME 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: SUPERVISION & CONSTR	UCTION LLC
2. The Florida document/registration number assigned to this lim	ited liability company is:
L18000001154	
3. The date this member/manager withdrew/resigned or will with	draw/resign is: 05 01 2018
4. I. GEOVANYS DIAZ MENESES, hereby with (Print Name of Person Resigning)	
MGR (Print Title)	
of this limited liability company and affirm the limited liability resignation in writing.	company has been notified of my
Si	
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required)	
Certified Copy: \$30.00 (Optional)	