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COVER LETTER

TO: Registration Section

CR2E079 (2/14)

Division of Corporations			
SUBJECT: CASTLEWOOD ENGINEE	RING, LLC		
(Name of Limited Liability Company)			
The enclosed member, resignation or dissoc	ciation and fee((s) are submitted for filing.	
Please return all correspondence concerning	g this matter to	:	
SCOTT MERCER			
(Contact Person)		-	
CASTLEWOOD ENGINEERING, LLC			
(Firm/Company)		_	
10529 SPRINGWOOD DRIVE			
(Address)		_	
PORT RICHEY, FL 34668			
(City/State and Zip Code)		_	
For further information concerning this mat	ter, please call	:	
Karan S. Nayee, Esq.	813 at (815-0510	
(Name of Contact Person)		e & Daytime Telephone Number)	
Enclosed please find a check made payable ■ \$25 Filing Fee		Department of State for: g Fee & Certified Copy	
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
Clifton Building		P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314	



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)

	limited liability company as it appears on the records of the Florida Departme TLEWOOD ENGINEERING, LLC
2. The Florida doc L1800004116	iment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
4. I. NICKI MERO	
AMBR	
	(Print Title)
of this limited lia resignation in wr	pility company and affirm the limited liability company has been notified of m ting.
Uh.	n
Signature of D	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required)
Certifica Copy.	\$30.00 (Optional)