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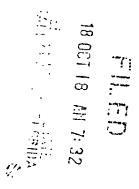
(Req	uestor's Name)				
(Address)					
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(City)	/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Busi	iness Entity Na	me)			
(Document Number)					
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COVER LETTER

TO:		stration Section sion of Corporations		
SUBJ	IECT:	Apex Turnkey Construction		
		(Name of Lin	nited Liability Cor	mpany)
The e	nclosed	d member, resignation or dissoc	iation and fee(:	s) are submitted for filing.
Please	e returr	all correspondence concerning	this matter to:	
Thon	nas Di	uarte		
		(Contact Person)		_
Apex	Turnk	key Construction, LLC		
		(Firm/Company)		- -
9300	NW 2	25 Street Suite#208		
		(Address)		_
Doral	I , Flor	rida 33172		
		(City/State and Zip Code)		_
For fu	irther i	nformation concerning this mat	er, please call:	
Thon	nas Du	uarte	786 _ at (693-2600
	(N	Jame of Contact Person)	(Area Code	& Daytime Telephone Number)
	sed plo 5 Filing	ease find a check made payable g Fee		Department of State for: g Fee & Certified Copy
		OURIER ADDRESS: Section		MAILING ADDRESS: Registration Section
Divisi	ion of (Corporations		Division of Corporations
	n Buile	-		P.O. Box 6327
		tive Center Circle Florida 32301		Tallahassee, Florida 32314

CR2E079 (2/14)



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)

	Elimited liability company as	s it appears on the records of the CTION, LLC	Florida Department	
2. The Florida doc L1800004319	-	ssigned to this limited liability o	ompany is:	
		signed or will withdraw/resign is	10/15/2018	
4. I, <u>NELIDA M. I</u>	PEREZ	hereby withdraw/resign as a		
(Print)	same of Person Resigning)	-		
PRESIDENT				
	(Print Title)			
resignation in wi	riting.	ne limited liability company has	been notified of my	
Signature of D	issociating Metyber or Resig	ining Manager	30 8t	
	\$25.00 (Required) \$30.00 (Optional)		THE ED	