L18000146803

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE

R. WHITE AUG 27 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Havenstein Wood and Concrete 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:
Henry Havenstah (Contact Person)
Haven & tein Wood and Concoate LLC (Firm/Company)
2494 comet lanc (Address)
Bonifay Florida 32425 (City/State and Zip Code)
For further information concerning this matter, please call:
Aury Haustein at (350) 703-2950 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Elorida Department of State for: S25 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

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

Registration Section

Division of Corporations P.O. Box 6327 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)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is: He	nuenstein Wood and Concrete LLC
	ument/registration number assigned to this limited liability company is:
	333/L/8000146803
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: $\frac{2/c/18}{c}$
4.1, Momas	hereby withdraw/resign as a fame of Person Resigning)
Manaa	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Themas	W Oh
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)