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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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SEPANTMENT OF STATE
STATE
STATE ANALYSEF, FLORIDS

TALLAND SEFE, FLORIDS

FEB 05 2020 S. YOUNG

COVER LETTER

TO:	_	stration Section sion of Corporations						
SUBJ	ECT:	CM CONCRETE SERVICES, LLC. (Name of Limited Liability Company)						
The e	nclosed	d member, resignation or dissocia	atior	and fee(s) are submitted for filing.			
Please	e return	all correspondence concerning t	his	matter to:				
MIGUI	EL MAF	RTINEZ						
		(Contact Person)			-			
CM C	ONCRE	ETE SERVICES, LLC.						
		(Firm/Company)			-			
1855 5	5TH AV	E						
		(Address)			-			
DELA	ND, FL	32724						
		(City/State and Zip Code)			-			
For fu	irther i	nformation concerning this matte	r, p	lease call:				
MIGU	EL MAF	RTINEZ	at (386	785-4709			
	(N	lame of Contact Person)	(& Daytime Telephone Number)			
Enclo	sed ple	ease find a check made payable to	o the	e Florida D	Department of State for:			
\$ 2	5 Filin	g Fee		\$55 Filing	Fee & Certified Copy			
		ng Address:			Street Address:			
	_	stration Section sion of Corporations			Registration Section Division of Corporations			
		Box 6327			The Centre of Tallahassee			
		hassee, FL 32314			2415 N. Monroe Street, Suite 810			
	1 4114	HIMOODER I D DED LT			Tallahassee, FL 32303			



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	s it appears on the records of th	e Florida Department
of State is:	ONCRETE SERVICES, LLC.		
2. The Florida docu L18000269546	iment/registration number a	ssigned to this limited liability	company is:
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign	12/01/2019 is:
4. I,	NEZ	, hereby withdraw/resign	as a
(Print N	ame of Person Resigning)		
MANAGER			
-	(Print Title)		
of this limited lial resignation in wr		he limited liability company has	s been notified of my
Juana Trailure of Di	Mut ssociating Member or Resig	minu Manager	
Januare of Di	ssociating Member of Resig	gning manager	
	\$25.00 (Required) \$30.00 (Optional)		2020 JAN DEPART DYSION O