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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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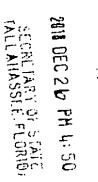


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COVER LETTER

TO: Registration Section Division of Corporations **Budget Remodeling and Solutions LLC** SUBJECT: (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: Alexander Del Riego (owner) (Contact Person) **Budget Remodeling and Solutions LLC** (Firm/Company) 1802 Flower Ave Apt H58 (Address) Panama City, FL 32405 (City/State and Zip Code) For further information concerning this matter, please call: Alexander DEL RIEGO 786 501-6918 at (____ (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee ■ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



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)

2. The Florida docu	ıment/registration numbe	er assigned to this limited liability compa	ny is:
L1800028183	7		•
			12/2018
	_	resigned or will withdraw/resign is:	
Carmen A. Argueta Yacaman		hereby withdraw/resign as a	hereby withdraw/resign as a
(Print N	ame of Person Resigning)	hereby withdraw/resign as a	
Manager			
	(Print Title)	 ·	
resignation in wr	iting.	n the limited liability company has been	·
Cur	nend an	queta Juecano.	12/12/2018
	ssociating Member or Re		