L19000051308

(Requestor's Name)					
(Address)					
(Modless)					
(Address)					
(City/State/Zip/Phone #)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Special Instructions to Filing Officer:					
!					

Office Use Only



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COVER LETTER

	Registration Section Division of Corporations
SUBJE	PYZA CONSTRUCTION LLC
	(Name of Limited Liability Company)
The encl	losed member, resignation or dissociation and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to:
KRZYSZ	ZTOF KRZANOWSKI
•	(Contact Person)
PY	ZA CONSTRUCTION LLC
	(Firm/Company)
SQ	801 GROVELINE CT
	(Address)
ES7	ERO FL 33928
	(City/State and Zip Code)
	her information concerning this matter, please call:
KRZ	15 z TOF KRZANOUSK 1 at (239) 641 - 6207 53 53 (Area Code & Daytime Telephone Number)
	(Name of Contact Person) (Area Code & Daytime Telephone Number)
	d please find a check made payable to the Florida Department of State for:

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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: PYZA	A CONSTRUCTION LLC				
L19000051308	-	ssigned to this limited liability co			
3. The date this me	ember/manager withdrew/resi	igned or will withdraw/resign is	$\frac{9/17/2023}{3}$		
(Print N		, hereby withdraw/resign as	0024 SEP		
	(Print Title) bility company and affirm th	e limited liability company has l	been notified of my		
resignation in wi	· ·		8: 29		
Signature of D	issociating Member or Resig	ning Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				