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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: PBS Paving LL (Name of Limited I.	iability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Steve Porteus (Contact Person)	
PBS Paving, LLC. (Firm/Company)	
14100 Hunters Trace L	ane
Clermont, FL 34715 (City/State and Zip Code)	<del></del>
For further information concerning this matter, pl	ease call:
Steve Parteus at ( (Name of Contact Person)	A07 ) A87 · 9 · 58  Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)

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)

1. The name of the	limited liability	company as it	appears on the re	ecords of the Fl	- •
of State is:	PBS Pau	ing, LLC	-		، ، ز <del></del> ز
2. The Florida docu	ment/registratio	n number ass	igned to this limi	ted liability con	npany is:
L 190	0006732	.6	·		•
3. The date this me	mber/manager w	vithdrew/resig	ned or will withd	lraw/resign is: _	4/3/2019
4. I, Eric 7	Beer		, hereby with	draw/resign as a	a
	-	gning)			
Memb	Print Title)	<del></del> ·			
of this limited liab	• • •	nd affirm the	limited liability o	company has be	en notified of my
Signature of Di	ssociating Mem	ber or Resigni	ng Manager	_	
Filing Fee: Certified Copy:					