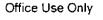
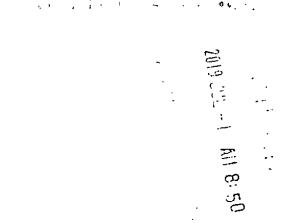
## L19000067326

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone #	7)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Name	<del></del> _
(Doc	cument Number)	
•		
Certified Copies	Certificates o	f Status
, <u> </u>	-	<del></del>
Special Instructions to I	Filing Officer:	





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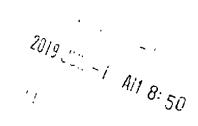
JUL 12 2019 I ALBRITTON

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SHRI	PBS PAVING, LLC		
.,(,1)	(Name of Limited Li	ability Com	pany)
The e	nclosed member, resignation or dissociation	and fee(s)	are submitted for filing.
Please	e return all correspondence concerning this n	natter to:	
STE	PHEN M PORTEUS		
	(Contact Person)		•
PBS	PAVING, LLC		
	(Firm/Company)		•
1410	00 HUNTERS TRACE LANE		
	(Address)		-
CLE	RMONT, FLORIDA 34715		
	(City/State and Zip Code)		-
For fi	urther information concerning this matter, pl	ease call:	
JOS	EPH W SPADE	407	715-2948 _)
	(Name of Contact Person) (A	Area Code	& Daytime Telephone Number)
	osed please find a check made payable to the 5 Filing Fee		Department of State for: Fee & Certified Copy
	EET/COURIER ADDRESS:		MAILING ADDRESS:
_	stration Section sion of Corporations		Registration Section Division of Corporations
	on Building		P.O. Box 6327
2661	Executive Center Circle hassee, Florida 32301		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)

	e limited liability company as it appears on the records of the Florida Department PAVING, ELC
2. The Florida doc L1900006732	nument/registration number assigned to this limited liability company is:
JOSEPH W	SPADE, hereby withdraw/resign as a Name of Person Resigning), hereby withdraw/resign as a
MEMBER	(Print Title)
of this limited lia resignation in wa	,
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)