## 119000 171445

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

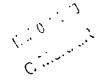
Office Use Only



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## **COVER LETTER**

cov	ER LETTE	R
TO: Registration Section		
Division of Corporations		
SUBJECT: Artigiani Granite & Cabinerty, LI		
(Name of	Limited Liability (	Jompany)
The enclosed member, resignation or diss	sociation and fe	e(s) are submitted for filing.
Please return all correspondence concerni	ing this matter t	o:
Juan Cafarelli		
(Contact Person)	<u></u>	
Artigiani Granite & Cabinerty, LLC		
(Firm/Company)		
3870 Mision Dr., Unit 10		
(Address)		<del></del>
Jacksonville, FL 32217		
(City/State and Zip Code)		<del></del>
For further information concerning this m	atter, please ca	II:
Sonia Taboada	904 at (	377-3059
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed please find a check made payab  ☐ \$25 Filing Fee	le to the Florida	

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)

		by as it appears on the records of the Florida Department $\epsilon$
of State is:	ani Granite & Cabinerty, LI	· · · · · · · · · · · · · · · · · · ·
2. The Florida docu 1.19000171445	iment/registration numb	per assigned to this limited liability company is:
3. The date this me	mber/manager withdrev	v/resigned or will withdraw/resign is: April 13, 2020
4. I, Nadim J. Faraj Ancheta  (Print Name of Person Resigning)		, hereby withdraw/resign as a
Manager		
	Print Title)	<del></del> .
resignation in wri		m the limited liability company has been notified of my
Nadim J. Faray 1	Andreta	4/20/2020
	ssociating Member or F	esigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	