## 419000288322

(Requestor's Name)		
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(Business Entity Name)		
(Document Number)		
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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: De G Granite Stone LLC (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:			
Darwin Garmendia (Contact Person)			
Dé. G. Granite Stone LLC (Fimi/Company)			
11091 Windsong Circle Apt. 202			
Naples FL. 34109 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Darwin Garmendia at (239), 250-3802  (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for:  S25 Filing Fee S55 Filing Fee & Certified Copy			
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 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	e records of the Florida Department
of State is:	ÉG Granite Stone L	LC .
2. The Florida doc	ament/registration number assigned to this lin	nited liability company is:
Documen	+ #L19000288322	
3. The date this mo	ember/manager withdrew/resigned or will wit	hdraw/resign is: 8 27 2021
	Nunez Avelar, hereby wi	thdraw/resign as a
MGR	(Print Title)	
of this limited lia resignation in wr	bility company and affirm the limited liabilit	y company has been notified of my
resignation in wi	iting.	CP
Banuel	NoneA	AUG
Signature of D	issociating Member or Resigning Manager	30
		T 0
_	\$25.00 (Required) \$30.00 (Optional)	·
certified Copy.	350.00 (Optionar)	·