

170000024045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

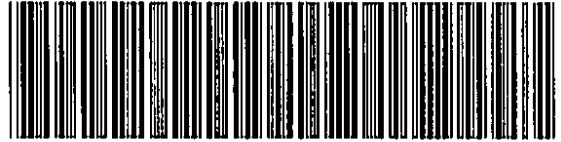
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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06/11/20--01002--011 \*\*25.00

JUL 10 2020

S. YOUNG

*[Signature]*  
S. YOUNG

2020 JUN 11 PM 4:39

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SIERRA REMODELING AND DECK 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:**

**Jorge Sierra**

(Contact Person)

**Sierra Remodeling and Deck LLC**

(Firm/Company)

5722 N LINCOLN AVE UNIT B

(Address)

TAMPA FLORIDA 33614

(City/State and Zip Code)

**For further information concerning this matter, please call:**

OTILIO MEDINA at (813) 750-9149  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

**\$25 Filing Fee**

☐ \$55 Filing Fee & Certified Copy

**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**



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: SIERRA REMODELING AND DECK LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L20000024045

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6-1-2020

4. I, GERSON SIERRA, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

AP

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

✓ Gerson Sierra  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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2020 JUN 11 PM 4:39  
TALLAHASSEE, FL  
CLERK OF THE COURT