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

| ECT:     |  |   |  |
|----------|--|---|--|
|          | (Name of I   | Limited Liability Co  | ompany)  |
| nclosed  | l member, resignation or diss  | ociation and fee(   | (s) are submitted for filing.  |
| return   | all correspondence concerni  | ng this matter to   | ;  |
| Ortiz    |  |   |  |
|          | (Contact Person)   |   | <del>-</del>   |
| E3 CON   | STRUCTION, LLC   |   |  |
|          | (Firm/Company)   | <u> </u>  | _  |
| IE 123rc | 1 Street. Suite 314  |   |  |
|          | (Address)  |   | _  |
| Miami, I | FL 33181   |   |  |
|          | (City/State and Zip Code)  |   | _  |
| rther ir | nformation concerning this m   | atter, please call  | :  |
| Ortiz    |  | 954<br>at (   | 574-2733   |
| (N       | ame of Contact Person)   |   | e & Daytime Telephone Number)  |
| sed ple  | ase find a check made pavab  | le to the Florida   | Department of State for:   |
| •        |  |   | ng Fee & Certified Copy  |
| Mailir   | ng Address:  |   | Street Address:  |
|          |  |   | Registration Section   |
| Divis    | ion of Corporations  |   | Division of Corporations   |
|          |  |   | The Centre of Tallahassee  |
| Talla    | hassee, FL 32314   |   | 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303  |
|          | Divis  ECT:  aclosed return  Ortiz  E123rd  Miami, I  ortiz  (N  sed ple is Filing  Mailir  Regis  Divis  P.O. | (Name of Inclosed member, resignation or dissonated member, resignation or dissonated member, resignation or dissonated member, resignation or dissonated members and concerniated members (Contact Person)  E3 CONSTRUCTION, LLC  (Firm/Company)  E 123rd Street, Suite 314  (Address)  Miami, FL 33181  (City/State and Zip Code)  rther information concerning this members (Name of Contact Person) | PHASE3 CONSTRUCTION, LLC  (Name of Limited Liability Conclosed member, resignation or dissociation and feet return all correspondence concerning this matter to cortiz  (Contact Person)  E3 CONSTRUCTION, LLC  (Firm/Company)  E 123rd Street, Suite 314  (Address)  Miami, FL 33181  (City/State and Zip Code)  rther information concerning this matter, please call (Area Code)  sed please find a check made payable to the Florida of Filing Fee  Mailing Address: Registration Section Division of Corporations P.O. Box 6327 |



## 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)

|  | limited liability company a   | as it appears on the reco | ords of the Florida D  | Department |
|--|---|---------------------------|--|------------|
|  | ment/registration number a  |                           | liability company i  | s:         |
| A T INFUSION CAR                           |   | h h 1 - 1                 | !  |            |
| of this limited liab<br>resignation in wri | Print Title)  pility company and affirm the ting.  Secociating Member or Resignations | the limited liability com | npany has been noti  | fied of my |
| Filing Fee; Certified Copy:                | \$25.00 (Required) \$30.00 (Optional)   | gning Manager             | Juan Martinez Commission • GG125607 Expires July 18: 2021 Bonded thru Aaron Notary |            |