L20 000071483

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LS water Proofs (Name of Limited L	iability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this r	natter to:
Christiva Hewett Str (Contact Person)	wiffer
LS unterprating UC (Firm/Company)	·
1910 28th Street (Address)	
Edgewater (1 3214) (City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
(Name of Contact Person) at (384 <u>144-8555</u> Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



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 the limited liability company as it appears on the records of the Florida Department of the limited liability company as it appears on the records of the Florida Department of the limited liability company as it appears on the records of the Florida Department of the limited liability company as it appears on the records of the Florida Department of the F	artment
of State is: LS Water proofing U.C.	
2. The Florida document/registration number assigned to this limited liability company is: L2000071683	
3. The date this member/manager withdrew/resigned or will withdraw/resign is:	<u>(30</u> 30
4. I. Christing the Stoffer, hereby withdraw/resign as a (Print Name of Person Resigning)	
Trte Warder (Print Title)	
of this limited liability company and affirm the limited liability company has been notified resignation in writing.	lofmy
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	5199 NDV 23