KZ00003Z0994

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: EMPIRE STONE & GRANITE LLC			
(Name of Lim	ited Liability Con	npany)	
The enclosed member, resignation or dissoci	ation and fee(s) are submitted fo	r filing.
Please return all correspondence concerning	this matter to:		
ERNESTO R LLERANDI			
(Contact Person)	<u> </u>	-	
EMPIRE STONE & GRANITE LLC			
(Firm/Company)	··	_	
7820 W 2ND CT			
(Address)		-	
HIALEAH, FL 33014			
(City/State and Zip Code)	na.	-	~2
For further information concerning this matter	er, please call:		2021 APR 13
ERNESTO R LLERANDI	954 at (559-1304	$\frac{1}{2}$ $\frac{2}{\omega}$
(Name of Contact Person)	(Area Code	& Daytime Telepho	one Number)
Enclosed please find a check made payable to \$25 Filing Fee		epartment of State Fee & Certified C	e for:

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)

		is it appears on the records of the Flor	rida Department
of State is: EMPI	RE STONE & GRANITE LLC		·
2. The Florida docu	unent/registration number a	assigned to this limited liability comp	any is:
L20000320994			
3. The date this men	mber/manager withdrew/res	signed or will withdraw/resign is: 04/ hereby withdraw/resign as a	2021 APR 13
(Print No	me of Person Resigning)		A11A
AMBR			
(Print Title)		7.0
resignation in wri	ting.	he limited liability company has been	notified of my
1	ssociating Member or Resig	gning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		