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/Po	questor's Name)			
(Ne	equestors Name)			
		-		
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)	<u> </u>		
Certified Copies Certificates of Status				
•	_			
Special Instructions to	Filing Officer:	Ì		
	_			
11 mills	`			
				

Office Use Only



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COVER LETTER

TO: Regis	stration Section		
Divis	sion of Corporations		
SUBJECT:	Better Building Works IIc		
	(Name of Lim	ited Liability Co	mpany)
The enclosed	d member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
Jeffrey Robers	on		
	(Contact Person)		_
Better Building	g Works lic		
	(Firm/Company)		_
701Pine Dr 20	3		
	(Address)		_
Pompano Beac	:h, Fl 33060		
	(City/State and Zip Code)		_
For further in	nformation concerning this matt	er, please call:	:
Jeffrey Robers	on	954 at (394-9646
(N	lame of Contact Person)		e & Daytime Telephone Number)
Enclosed ple	ease find a check made payable t	o the Florida	Department of State for:
S25 Filing			g Fee & Certified Copy
	ng Address:		Street Address:
	stration Section sion of Corporations		Registration Section Division of Corporations
	Box 6327		The Centre of Tallahassee
	hassee, FL 32314		2415 N. Monroe Street, Suite 810
1 aild	massee, I is 52517		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 a	s it appears on the records of the	: Florida I	Depart	ment
of State is:	Buiding Works llc		TAT SE	2024	·
		assigned to this limited liability o	company	APR -8 AM	
3. The date this me	mber/manager withdrew/re	signed or will withdraw/resign i	s: <u>4/22024</u>		
4. I,	ngton	, hereby withdraw/resign	as a >	9;1,9	
(Print N	lame of Person Resigning)				
Authoried member	r				
	(Print Title)				•
resignation in wr		he limited liability company has gning Manager	been noti	ified o	f my
_	\$25.00 (Required) \$30.00 (Optional)				•
Continue Copy.	asoloo (Optional)				