## K21000100768

(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



400396311104

Delta 200=1000 3 € \*\*55,33

2022 OCT 25 PH 12: 02 SECRETARY OF STATE TALLAR TO SECRETARY

#### **COVER LETTER**

Division of Corporations	
SUBJECT: National Pavers LLC (Name of Limited Liability Con	mpany)
The enclosed member, resignation or dissociation and fee(s	s) are submitted for filing.
Please return all correspondence concerning this matter to:	
Frankie Cruz (Contact Person)	_
National HardScape Designs LLC	<u>.                                    </u>
12401 orange grove Drive apt.1615	<u>)</u>
Tampa FL 33618 (City/State and Zip Code)	_
For further information concerning this matter, please call:	
Frankic Cruz at (813) (Name of Contact Person) (Area Code	2382 Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I  ☐ \$25 Filing Fee ☐ \$55 Filing	Department of State for: g 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

CR2E079 (2/14)

TO: Registration Section



# 2022 OCT 25 PH I2: 02 SECRETARY OF STATE TALL AND SECRETARY

### 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 Departme	ent
of State is: <u>Na</u>	tional Pavers LLC	'
2. The Florida docu	ment/registration number assigned to this limited liability company is:	
L2100010	00768	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 10-19-22	_
4. I, Frankie (Print N	iame of Person Resigning), hereby withdraw/resign as a	
Owner		
of this limited lial resignation in wr	bility company and affirm the limited liability company has been notified of niting.	пy
Tetu	B Coul	
Signature of Di	ssociating Member or Resigning Manager	
•	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	