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(Re	equestor's Name)	
(Ad	ldress)	-
(Ad	idress)	
(Cit	ty/State/Zip/Phone #	<i>‡</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to Filing Officer:		
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Office Use Only



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COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: Guines Fence LLC		
(Name of Limited Liability	· Company)	
The enclosed member, resignation or dissociation and f	ee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to:	
Francisco J. Capote		
	RECEIVED	
Guines Fence MC		
Guius Fence UC (Firm/Company)	2022 APR - 1 AM 7:58	
12705 D.E Bru Due (Address)	SECRETAL OF STATE TALLAHASSEE, FL	
(Address)		
North Miani, Fl 33161		
(City/State and Zip Code)	202 SE	
For further information concerning this matter, please of	call: Apple 1 Apple 1 Apple 2 Apple 2 Apple 2 Apple 3 Apple 3 Apple 4 Apple	
Francisco I Copole 31 (9)	9 1 221-06932	
Francisco J. Capole at (94) (Name of Contact Person) (Area C		
Enclosed please find a check made payable to the Florie	<u>ن</u> به	
	iling Fee & Certified Copy	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations Division of Corporations		
P.O. Box 6327 The Centre of Tallahassee		
Tallahassee, FL 32314	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)
1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: Guives Fence 120
2. The Florida document/registration number assigned to this limited liability company is:
1 a 1 0 20 11 37 (e)
3. The date this member/manager withdrew/resigned or will withdraw/resign is: $04 \partial \omega $
4. I. Francisco J. Copote hereby withdraw/resign as a (Print Name of Person Resigning)
Vice-Priident. (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)