L2100036479

(Re	questor's Name)		
•	,		
(Address)			
(Address)			
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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Office Use Only



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COVER LETTER

Division of Corporations H & L UNITED CONSTRUCTION LLC. (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: DARWIN J PEREZ (Contact Person) 2156 18th ave sw (Address) vero beach, Fl 32962 (City/State and Zip Code) For further information concerning this matter, please call: DARWIN PEREZ 321 8775473 (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee [] \$55 Filing 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

TO:

Registration Section



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	he limited liability company as i	t appears on the records of the Florida Department
of State is:	& L UNITED CONSTRUCTION LLC	
2. The Florida do L21000364798	ocument/registration number ass	igned to this limited liability company is:
DARWINTP	1:81:2	gned or will withdraw/resign is: 07/07/2023
4. 1. (Prin.	t Name of Person Resigning)	, hereby withdraw/resign as a
MGR		
	(Print Title)	
of this limited l resignation in v		limited liability company has been notified of my
	Darylin Jerry	
Signature of	Dissociating/Member or Resign	ing Manager
Filing Fee:	\$25.00 (Required)	

Certified Copy:

\$30.00 (Optional)