

121 000441954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

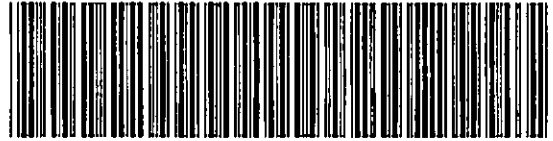
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
AUG 13 2022

Office Use Only



400388295174

05/01/22--01011--010 4.25.00

FILED  
2022 JUN -1 AM 9:49  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JIREH S&S 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:

ROBERTO GONZALEZ

(Contact Person)

TAXSMART ACCOUNTING SERVICES LLC

(Firm/Company)

6653 POWERS AVE STE 136

(Address)

JACKSONVILLE, FL 32217

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERTO GONZALEZ

(Name of Contact Person)

at ( 904 ) 733-0027

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing 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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED  
2022 JUN -1 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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: JIREH S&S CONSTRUCTION LLC

2. The Florida document/registration number assigned to this limited liability company is:  
1.21000441954

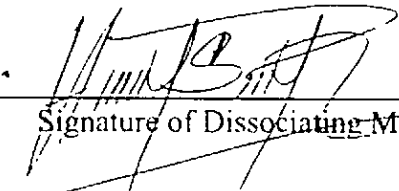
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 05/27/2022

4. I, HECTOR S RIVERA MORALES, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MGR

*(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)