122000232247

(Reques	stor's Name)		
(Addres	s)		
(Addres	s)		
(City/St	ate/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Busine	ss Entity Nan	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filin	g Officer:		





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COVER LETTER

TO:	Registration Section		
	Division of Corporations		
SUBJ	ECT: South Quality (Name of Limited Liability	Roofing y Company)	
The en	nclosed member, resignation or dissociation and	fee(s) are submitted for filing.	
Please	return all correspondence concerning this matte	er to:	
<u>O</u>	many yourse (Confider Person)		
_ <u>}c</u>	xeth Quality Roofing (Firm/Company)		
23	621 SW 167 th AVE (Address)	<u>_</u>	
<u>4/0</u>	mestead, Florida 33031 (City/State and Zip Code)		
For fu	rther information concerning this matter, please	call:	7000
	Osmany Yornes at (78 (Name of Contact Person) (Area	6,3668640	
	(Name of Contact Person) (Area	Code & Daytime Telephone Number)	
Enclos	sed please find a check made payable to the Flor	ida Department of State for:	: ::
	• • • • • • • • • • • • • • • • • • • •	Filing Fee & Certified Copy	 ⊳>
	Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations	
	P.O. Box 6327	The Centre of Tallahassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	0



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 De	partmen	ıŧ
of State is: South Quality Roofing	 -•	
2. The Florida document/registration number assigned to this limited liability company is:		
L22000232247		
3. The date this member/manager withdrew/resigned or will withdraw/resign is: $\frac{06}{2}$	0/20	22
4.1. Lower Postula , hereby withdraw/resign as a (Print Name of Person Resigning)	2822	-
Guthorized Person	03	. ,
of this limited liability company and affirm the limited liability company has been notific	- , 	
resignation in writing.	ea oḤmy	, .
Signature of Dissociating Member or Resigning Manager		

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)