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(Requestor's Name)					
(Address)					
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(Business Entity Name)					
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COVER LETTER

_	stration Section sion of Corporations				
SUBJECT:	Emperial Demolition LLC				
	(Name of Limited Liability Company)				
The enclosed	d member, resignation or dis	sociation and fee(s) are submitted for filing.		
Please return	all correspondence concerr	ning this matter to:	:		
Jesus Carrasco					
	(Contact Person)				
Emperial Demo	oliton LLC				
	(Firm/Company)		_		
14447 15th St					
<u> </u>	(Address)		_		
DAde City Fl 3	33523				
	(City/State and Zip Code)		_		
For further in	nformation concerning this r	natter, please call:			
Jesus Carrasco		813 at (599-6547		
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)		
Enclosed plea	ase find a check made payal	ole to the Florida I	Department of State for:		
□ \$25 Filing			g Fee & Certified Copy		
	g Address:		Street Address:		
_	tration Section		Registration Section		
	ion of Corporations Box 6327		Division of Corporations		
	hassee, FL 32314		The Centre of Tallahassee 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)

	limited liability company as		f the Florida Department
	ment/registration number as		ity company is:
4. 1, Jesus Carrasco Sr (Print No.	nme of Person Resigning)		
of this limited liab resignation in wri	Print Title) illity company and affirm the		5
Signature of Dis	Sociating Member or Resignus \$25.00 (Required) \$30.00 (Optional)	S.C. ning Manager	A 9: 37