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COVER LETTER

Division of Corporations AJ FLOORING & CONSTRUCTION LLC SUBJECT: ___ (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: JOHENRRY NICORONA (Contact Person) AJ FLOORING & CONSTRUCTION LLC (Firm/Company) 2112 W SAINT LOUIS ST (Address) TAMPA, FL 33607 (City/State and Zip Code) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) JOHENRRY N CORONA (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: **■** \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Street Address: Mailing 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)

	the name of the limited liability company as it appears on the records of the Florida Department AJ FLOORING & CONSTRUCTION LLC.			
	ument/registration number as L23000024930	ssigned to this limited liability con	mpany is:	
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is:, hereby withdraw/resign as		
(Print)	Same of Person Resigning) AMBR	nerco, watanawi congin as		
resignation in w	riting.	ne limited liability company has be	cen notified of my	
Signature of D	issociating Member or Resig	ning Manager	SFORET 2023 Aug	
	\$25.00 (Required) \$30.00 (Optional)		ETÄRY OF STAT	