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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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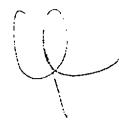
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COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: Sarasota Paver Seali (Name of Limited Liability Co | |
| The enclosed member, resignation or dissociation and fee(| (s) are submitted for filing. |
| Please return all correspondence concerning this matter to | • |
| Patrick Adams (Contact Person) Patrick's Pressure Washing LLC (Firm/Company) | |
| 6312 Tarawa Dr (Address) Sarasota, FL 34241 | 2023 JUL SEUNIL TALL |
| (City/State and Zip Code) For further information concerning this matter, please call. | H 53 = |
| |) 0 1 |
| Enclosed please find a check made payable to the Florida | e & Daytime Telephone Number) Department of State for: g 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

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 con | npany as it a | ppears on the r | ecords of t | he Florida | Depart | tment |
|---------------------|------------------------------|---------------|-------------------|-------------|---|---------|----------------|
| of State is: | Sarasota | Paver | Sealing | Pros | LLC | | · |
| 2. The Florida docu | ıment/registration nı | | | | | | |
| L 23 C | 00098166 | · | | | A SEC | 2023、 | <i>ट्राम्म</i> |
| 3. The date this me | mber/manager withou | drew/resigne | ed or will withd | lraw/resign | is: = = = = = = = = = = = = = = = = = = = | 5 Z Z | 3 |
| 4.1, Patric | k Adams | | _, hereby with | draw/resign | n as a SS | 8 ₽ | M |
| (Print N | ame of Person Resigning | 3) | - | _ | m _o , | = | |
| ſ | MGR | _ | | | FA | . 22 | |
| (| (Print Title) | | | | | | |
| resignation in wri | pility company and a string. | | mited liability o | company h | as been not | ified o | f my |
| Signature of Di | ssociating Member | or Resigning | Manager | _ | | | |
| Filing Fee: | \$25.00 (Required | 1) | | | | | |
| Certified Copy: | \$30.00 (Required | * | | | | | |