## L23000116475

(Re	questor's Name)		
(Ad	dress)		
(Add	dress)		
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10:1	(0) - (7) (0)	45	
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(		,	
(500	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to I	Filing Officer		
	amig cincor.		
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Office Use Only



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## **COVER LETTER**

TO: Registration Section	
Division of Corporations	
SUBJECT: REPUBLIC CONSTRUCTION COM	IPNAY LLC
(Name of Limi	ted Liability Company)
The enclosed member, resignation or dissocia	ation and fee(s) are submitted for filing.
Please return all correspondence concerning t	his matter to:
STEVEN NEUBARTH	
(Contact Person)	
REPUBLIC CONSTRUCTION COMPANY LLC	
(Firm/Company)	
55 SE 2ND AVE	
(Address)	
DLERAY BEACH, FL 33444	
(City/State and Zip Code)	
For further information concerning this matte	r, please call:
STEVEN NEUBARTH	at ( <u>561</u> ) <u>900-3330</u>
(Name of Contact Person)	(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:	Street 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



## 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 a	ns it appears on the records of the	he Florida Department
of State is: Florid	la		
2. The Florida doc	ument/registration number	assigned to this limited liability	company is:
1.23000116475	4 <del>60 - 1</del> - 1		
3. The date this me	mber/manager withdrew/re	esigned or will withdraw/resign	is: 11/10/2023
4. 1. Catheryn Espino		, hereby withdraw/resign	i as a
(Print N	lame of Person Resigning)		<b>.</b> .
MGR			2023 NOV .
	(Print Title)		10 T
of this limited lia	bility company and affirm t	the limited liability company ha	as been notified of my
resignation in writing.		,	2 7
			PI 4:
<i>G</i> -	Dans		19
Signature of D	ssociating Member or Resi	gning Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		