

L23000512520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

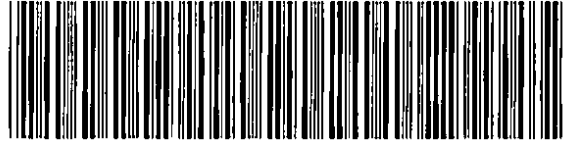
(Business Entity Name)

(Document Number)

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JANUARY 1, 2024

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Endicott Repair and Rebuild, L.L.C.  
(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:

Victor R. Indicott, Jr.  
\_\_\_\_\_  
(Contact Person)

Endicott Repair and Rebuild, LLC

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(Firm/Company)

655 North Brida Street  
\_\_\_\_\_  
(Address)

Clewiston, Florida 33440

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(City/State and Zip Code)

For further information concerning this matter, please call:

Victor R Endicott, Jr. 239 462-5489  
\_\_\_\_ at (\_\_\_\_) \_\_\_\_\_  
(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:**

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

CR2E079 (2/14)



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 Department of State is: Endicott Repair and Rebuild, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L23000512520

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/28/2023

4. I, Bella I. Endicott, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

AP (Authorized Person)

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Bella Endicott

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)