

L24000129548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

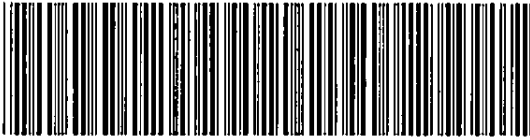
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
JUN 25 2024

Office Use Only



600431125016

06/06/24--01026--006 **55.00

FILED
2024 JUN 06 11:11

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wooden City LLC
(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:

Francisco Javier Vargas Baquero
(Contact Person)

Wooden City LL
(Firm/Company)

90 Las Brisas
(Address)

Boynton Beach Florida 33426
(City/State and Zip Code)

For further information concerning this matter, please call:

Francisco Javier Vargas Baquero at (305) 7786036
(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



FILED
2024 JUL -6 AM 11:12

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: Woodem city LLC

2. The Florida document/registration number assigned to this limited liability company is:
L24000129548

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 05/23/2024
(Walter de Souza Pires Filho)

4. I, LGW construction corp, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager
(Print Title)

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

Walter Pires
Signature of Dissociating Member or Resigning Manager

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