## L24000207717

(Requestor's Name)	
(Address)	
(Address)	-
16 in 16 and 17 in 17 in 17	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	s
Special Instructions to Filing Officer:	

Office Use Only



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2024 SEP 24 AM 8: 47 SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section **Division of Corporations** Believers Construction Group 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: Reginald Glover Sr. (Contact Person) Believers Construction Group LLC (Firm/Company) 271 Mt Pleasant Road (Address) Quincy, FL 32352 (City/State and Zip Code) For further information concerning this matter, please call: Reginald Glover Sr. 850 510-9080 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: 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)

		it appears on the records of t	he Florida Department
of State is:	vers Construction Group LLC		
2. The Florida docu L24000207717	ımen√registration number as	ssigned to this limited liability	y company is:
3. The date this me	mber/manager withdrew/resi	igned or will withdraw/resign	August 1, 2024
4. I, Richard M. Otway  (Print Name of Person Resigning)  , hereby withdraw/resign as a		π as a	
Manager	(Print Title)	•	
of this limited lial resignation in wr	bility company and affirm the iting.	e limited liability company h	as been notified of 24 SEP 24
Signature of Di	ssociating Member of Resign	ning Manager	MH 8: 43
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		43