

# L15000090952

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

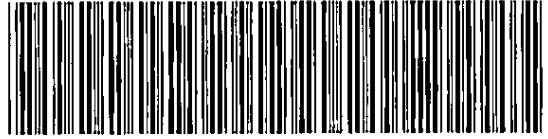
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900401141509

02/06/23--01011--001 \*\*25.00

**FILED**  
2023 FEB -6 PM 3:19  
CLERK OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ameridocks 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:

Carolyn Bright  
(Contact Person)

Ameridocks LLC  
(Firm/Company)

7318 Amber Drive  
(Address)

New Port Richey FL 34653  
(City/State and Zip Code)

For further information concerning this matter, please call:

Carolyn Bright at ( 727 ) 848 6475  
(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

check # 3114

**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

2023 FEB -6 PM 3:19

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FL

**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: Ameridocks, LLC

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

L15000090952

3. The date this member/manager withdrew/resigned or will withdraw/resign is: January 1, 2022

4. I, Scott M. Bright, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Registered Agent / Member  
*(Print Title)*

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

Scott M Bright

Signature of Dissociating Member or Resigning Manager

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