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COVER LETTER

TO: Registration Section Division of Corporations	
11 Bud Shire Lane LLC SUBJECT:	
(Name of Limited Liability C	Company)
The enclosed member, resignation or dissociation and fe	e(s) are submitted for filing.
Please return all correspondence concerning this matter t	o:
Roger Buyce	
(Contact Person)	
11 Bud Shire Lane	
(Firm/Company)	
25 Coolidge Court	
(Address)	
Palm Coast FL 32137	
(City/State and Zip Code)	
For further information concerning this matter, please ca	II:
Roger Biyee 954 at (240-1897
	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida ☐ \$25 Filing Fee ☐ \$55 Filing Fee	a Department of State for: ing Fee & Certified Copy
□ \$25 1 mmg 1 cc	ing ree & 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)

The name of the limited liability company as it of State is: It Bud Shire Lane LLC	appears on the records of the Florida Department
2. The Florida document/registration number assi	gned to this limited liability company is:
3. The date this member/manager withdrew/resign	ned or will withdraw/resign is: 4/29/21
4. I, Gregory Boyce (Print Name of Person Resigning)	, hereby withdraw/resign as a
AR (Print Title)	
of this limited liability company and affirm the resignation in writing. Signature of Dissociating Member of Resigning Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	limited liability company has been notified of my 2021 HAV - 3 PM 1: 16