101160000J101

(Requestor's Name)
(Address)
(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:
Resign
<i>0</i> Office Use Only



100079558661

09/11/06--01031--008 **25.00

O6 SEP 11 PH 2: 37
SECRETARY OF STATE ORIDA



TO: Registration Section **Division of Corporations** SUBJECT: FIRST COAST EQUITY, LLC (Name of Limited Liability Company) Dear Sir or Madam: The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Hazem Bata (Name of Person) (Firm/Company) 621 Knollwood Lane (Address) St. Augustine, FL 32086. (City/State and Zip Code) For further information concerning this matter, please call: Hazem Bata (Name of Person) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee ☐\$55 Filing Fee & Certified Copy CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Gerald P. Petito	, hereby resign as member	
	(Title)	
of FIRST COAST EQUITY, LLC		
(Limited Liability Company)		
a limited liability company organized under the laws of the State of Florida ,		
and affirm that the limited liability company has been notified in writing of the resignation.		
gull my Att		
(Signature of resigning manager,	managing member or member)	

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314