L09000082099

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

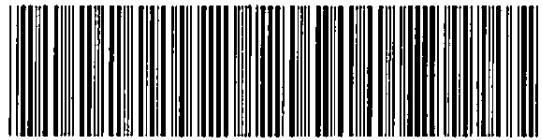☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer.

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Office Use Only

04/16/24--01042--004   **55.00

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COVER LETTER

TO: Registration Section
        Division of Corporations

SUBJECT: __BEFOUR, 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:

MATT BRYANT
_____

                (Contact Person)

_____

                (Firm/Company)

6211 KINGSLEY LAKE DRIVE
_____

                (Address)

STARKE,FL. 32091
_____

            (City/State and Zip Code)

For further information concerning this matter, please call:

MATT BRYANT   904   769-3893
_____ 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

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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: BEFOUR, LLC

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

   L09000082099

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/07/2023

4. I, EDWARD B BARBER _____, hereby withdraw/resign as a

   (Print Name of Person Resigning)

   MANAGER/MEMBER

   (Print Title)

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

_____

Signature of Dissociating Member or Resigning Manager

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

CR2E079 (2/14)