

L10000060004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

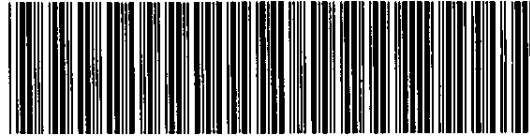
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 15 2015
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: By The C, 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:

Michelle Pinel
(Contact Person)

By The C, LLC
(Firm/Company)

2405 Avenue C
(Address)

Bradenton Beach, FL. 34217
(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Pinel at (941) 962-2761.
(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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



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: By The C, LLC

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

L10000060004

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

July 13 2015

4. I, William Toby Pine I., hereby withdraw/resign as a

(Print Name of Person Resigning)

Manager

(Print Title)

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

X [Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE FLORIDA