

L100000110700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

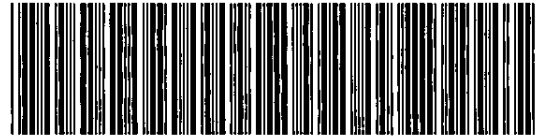
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/25/14--01024--022 **85.00

14 MAY 22 PM 9:32

R. A. / m g m
@ 5/23/14

COVER LETTER

RECEIVED

TO: Registration Section
Division of Corporations

14 MAY 22 PM 2:10

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SUBJECT: West Coast international, 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:

Diane Nicolas
(Contact Person)

(Firm/Company)

10785 Emerald Chase Dr.
(Address)

Orlando FL, 32886
(City/State and Zip Code)

For further information concerning this matter, please call:

Diane Nicolas at (407) 399-7171
(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

May 2, 2014

DIANE NICOLAS
10785 EMERALD CHASE DRIVE
ORLANDO, FL 32835

SUBJECT: WEST COAST INTERNATIONAL, L.LC
Ref. Number: L10000110700

We have received your document for WEST COAST INTERNATIONAL, L.LC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

You are not listed as the current registered agent, please see the enclosed form to resign.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 414A00009431



FILED
DIVISION OF CORPORATIONS
14 MAY 22 AM 9:32

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: West Coast International, LLC

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

L10000110700

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5/8/15

4. I, Diane Nicolas, hereby withdraw/resign as a
(Print Name of Person Resigning)

MEM

(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)