## L10000 116360

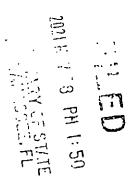
<u>-</u>					
(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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## **COVER LETTER**

_	sion of Corporations		
SUBJECT:	BMI ELITE HOLDINGS L.L.C.		
SODULOT.	(Name of Limi	ted Liability Con	npany)
The enclosed	d member, resignation or dissocia	ation and fee(s	) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
CHRISTOPHE	ER MUSCATO NINOS C.P.A.		
	(Contact Person)		<del>-</del>
CHRISTOPHE	ER M. NINOS C.P.A. P.A.		
	(Firm/Company)		_
1600 SOUTH	DIXIE HIGHWAY SUITE #503		
· · · · · · · · · · · · · · · · · · ·	(Address)	<u></u>	_
BOCA RATO	N FLORIDA 33432-7454		
	(City/State and Zip Code)		<del></del>
For further i	information concerning this matt	er, please call:	
CHRISTOPH	ER NINOS	561 at (	750-5466
(1)	Name of Contact Person)	(Area Code	2 & Daytime Telephone Number)
-	ease find a check made payable		Department of State for: g Fee & Certified Copy
□ \$25 Filin	ig i co	= 455 1 mm	grot w outhing copy
	ing Address:		Street Address: Registration Section
_	istration Section ision of Corporations		Division of Corporations
P.O.	. Box 6327		The Centre of Tallahassee
Tali	ahassee, FL 32314		2415 N. Monroe Street, Suite 81

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)

		t appears on the records of the	Florida Departm	ent
	LITE HOLDINGS L.L.C.  ment/registration number ass	signed to this limited liability o	company is:	*
3. The date this men	nber/manager withdrew/resig	gned or will withdraw/resign is	10/27/2021 s:	_
4. I, DANIEL L. LAN	SMAN	, hereby withdraw/resign a	as a	
MANAGER	Member Print Title)			
	pility company and affirm the	e limited liability company has	been notified of	my
2/			2021 +	. 1
Signature of Di	ssociating Member or Resign	ning Manager	24471 8.63	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		PH 1:50	