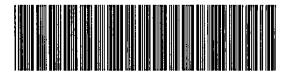
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(Red	questor's Name)				
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## **COVER LETTER**

TO: Registration Section

CR2E079 (2/14)

Divis	ion of Corporations					
SUBJECT:	MANATEE BUGGYWORKS,	LLC.				
(Name of Limited Liability Company)						
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.						
Please return	all correspondence concerning th	is matter to:				
TERRY A N	NICHOLS					
	(Contact Person)		-			
MANATEE	BUGGYWORKS, LLC					
	(Firm/Company)		-			
1410 MAR	TIN LUTHER KING AVENUE	EAST				
	(Address)		-			
BRADENT	ON, FLORIDA, 34208					
	(City/State and Zip Code)		_			
For further information concerning this matter, please call:						
TERRY A		941 at (	201-2564			
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for:  \$\Bigsim \frac{1}{2} \\$55 \text{Filing Fee & Certified Copy}\$						
Registration Division of C Clifton Build 2661 Execut	Corporations		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)

	limited liability company as it	appears on the records of the F.C.	lorida Department
2. The Florida docu L1100003934	•	igned to this limited liability co	mpany is:
TERRELL E	NICHOLS	ned or will withdraw/resign is:	36 3
(Print N	·	, nave, ,e., g.,	a AllAccept
	• •	limited liability company has be	een notified of my
Teraell & Signature of Di	Sociating Member or Resigni	ng Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		