

LIP00052554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

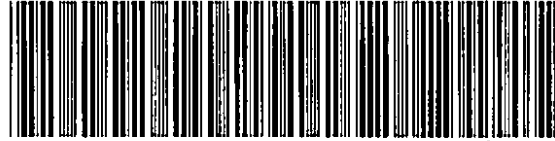
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION

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NOV 06 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bigfoot Charters 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:

Mark A Tilly

(Contact Person)

266 Lyndhurst Street

(Firm/Company)

(Address)

Dunedin, Florida 34698

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Tilly

727

366-3667

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

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)

FILED
77 NOV -3 PM 2:46
FROM

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

2. The Florida document/registration number assigned to this limited liability company is:
L11000052554

3. The date this member/manager withdrew/resigned or will withdraw/resign is: October 1, 2017
Christopher Biery

4. I, Christopher Diery, hereby withdraw/resign as a
(Print Name of Person Resigning)
 title manager

(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) |