

LB000015763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

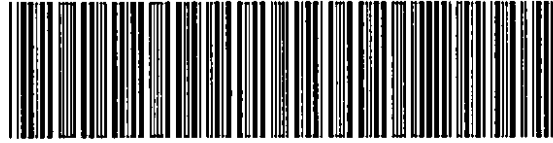
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300361634563

03/22/21--01001--023 **55.00

FILED
2021 JUN 14 PM 3:05
ALABAMA SECRETARY OF REVENUE

cc
Resignation

JUN 23 2021
ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAY POINT HOUSE #721, 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:

TERESITA F. MIYARES

(Contact Person)

MIYARES GROUP, LLC

(Firm/Company)

130 MADEIRA AVE

(Address)

CORAL GABLES, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ 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

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2021 JUN 14 PM 2:56

STATE OF FLORIDA

May 27, 2021

TERESITA F. MIYARES
130 MADEIRA AVENUE
CORAL GABLES, FL 33134

SUBJECT: BAY POINT HOUSE #721, LLC
Ref. Number: L13000015763

We have received your document for BAY POINT HOUSE #721, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the date of resignation.

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: 421A00011598



FILED
2021 JUN 14 PM 3:05
TALLAHASSEE, FL

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: BAY POINT HOUSE #721, LLC

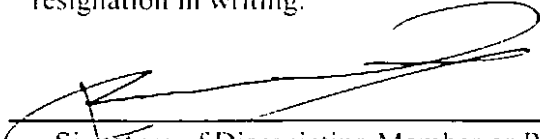
2. The Florida document/registration number assigned to this limited liability company is:
L13000015763

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 03/31/2021.

4. I, RICARDO OLIVO, 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)