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SELURE LANGE FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Eric Hurley Ba (Name of Limited Liability)	SCDAII, LLC cy Company)
The enclosed member, resignation or dissociation and	fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to:
Eric Hurley (Contact Person)	<del></del>
Eric Hurtey Baschall, LLC (Film/Company)	
124 Scotland Llard Blva.	
St. Johns FL. 32-259 (City/State and Zip Code)	<u> </u>
For further information concerning this matter, please	call:
(Name of Contact Person) at (91)	04 ) 509 - 2437 Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flor \$25 Filing Fee \$55	rida Department of State for: Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Tallahassee, FL 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)

1. The name of the	limited liability company as i	t appears on the records of	the Florida Department
of State is:	Eric Hurley	Baseball, 1	LC
2. The Florida docu	ument/registration number ass	igned to this limited liabili	ty company is:
L13000	020057		
3. The date this me	mber/manager withdrew/resig	ned or will withdraw/resig	n is: 12 31 2019
4. I, <u>Print N</u>	ame of Person Resigning)	, hereby withdraw/resig	gn as a
MAR	Print Title)		
of this limited lial resignation in wr	oility company and affirm the iting.	limited liability company h	has been notified of my
KI	Lun		<b>2021</b> TĀLI
Signature of Di	ssociating Member or Resign	ing Manager	2021 APR SEURE E
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		A-9 AMIO: 20 ASSEE, FLORID.