## 11300005/44/

(Re	questor's Name)	
(Ad	dress)	<del></del>
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	)
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: BSP Holdings (Name of Limited I	LLC Liability Company)
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
MARC BARHONOVICH (Contact Person)	
(Firm/Company)	
17029 PAULA LN.	
LUTZ FL. 33558  (City/State and Zip Code)	
For further information concerning this matter, p	lease call:
at (Name of Contact Person)	( <u>813</u> ) <u>957-2949</u> (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for: \$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

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)

1. The name of the li	mited liability company as it appears on the records of the Florida Department
of State is:	BSP HOLDINGS LLC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
L13000	51441
3. The date this mem	tber/manager withdrew/resigned or will withdraw/resign is: June 1, 101
	BARHO NOVICH hereby withdraw/resign as a me of Person Resigning)
	SAG-ER Print Title)
of this limited liabi	lity company and affirm the limited liability company has been notified of my ing.
W.	whom a lich
Signature of Dis.	Sociating Member or Resigning Manager  ARC S. BARHONOVICH
_	\$25.00 (Required) \$30.00 (Optional)