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COVER LETTER

-	stration Section sion of Corporations			
SUBJECT:	Bury Me Brewing LLC			
	(Name of Limited Liability Company)			
The enclose	d member, resignation or dissoci	iation and fee(s) are submitted for filing.	
Please return	n all correspondence concerning	this matter to:		
Barry Schr	ayer			
	(Contact Person)		_	
Bury Me Bi	rewing LLC			
	(Firm/Company)	····	_	
4224 Cleve	eland Ave Unit # 7			
	(Address)		_	
Fort Myers	, FL 33901			
-	(City/State and Zip Code)		····	
For further is	nformation concerning this matte	er, please call:		
Barry Schra	ayer	954 at (461-6111	
(N	Jame of Contact Person)	_ \	& Daytime Telephone Number)	
Enclosed plo	ease find a check made payable t g Fee		Department of State for: g 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	

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)

	e limited liability company as y Me Brewing LLC	s it appears on the records of the l	Florida Department
2. The Florida doc L1300009629		ssigned to this limited liability co	ompany is:
William H W	aughan Ir	igned or will withdraw/resign is:, hereby withdraw/resign as	
Member	(Print Title)		
of this limited lia resignation in w		e limited liability company has b	2016 JUL
Signature of D Filing Fee: Certified Copy:	S25.00 (Required) \$30.00 (Optional)	ning Manager	JL-5 PH 4: