113000134362

(1	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:		

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COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: BM18 LLC	
(Name of Li	imited Liability Company)
The enclosed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
FERNANDA SILVA	
(Contact Person)	
A&F FINANCIAL LLC	
(Firm/Company)	
4851 W HILLSBORO BLVD, STE#A2	
(Address)	
COCONUT CREEK, FL 33073	
(City/State and Zip Code)	
For further information concerning this ma	tter, please call:
FERNANDA SILVA	754 205-9371
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	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 limited liability company as i of State is: BM18 LLC	t appears on the records of the Florida Department
2. The Florida document/registration number ass L13000134362	igned to this limited liability company is:
3. The date this member/manager withdrew/resig	med or will withdraw/resign is:
4. 1. BIANCA TERESA ROSENTHAL (Print Name of Person Resigning)	- -
MGR	
(Print Title)	
of this limited liability company and affirm the resignation in writing.	limited liability company has been notified of my
Diang Sunthal	7
Signature of Dissociating Member or Resign	ing Manager