

L15 0000052076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

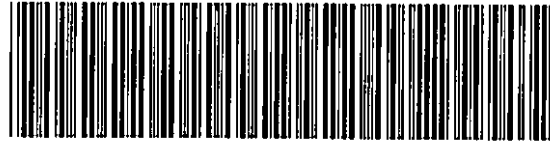
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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19 OCT 28 AM 10:44

REC'D 16 OCT 2019  
TALLAHASSEE, FL 32304

NOV 21 2019  
S. YOUNG



CONNER • BOSCH LAW, P.A.  
ATTORNEYS

*4488 North Oceanshore Boulevard  
Palm Coast, Florida 32137  
Telephone (386) 445-9322  
Facsimile (386) 446-4951*

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[wbosch@cblpa.com](mailto:wbosch@cblpa.com)

October 24, 2019

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32315

**Re: Resignation**

Dear Sir/Madam:

Please find enclosed the original, executed Dissociation or Resignation of Member, Manager from Florida Limited Liability Company.

Further enclosed is a check in the sum of \$25.00 made payable to the "Florida Department of State" in payment of the filing fee.

Your prompt attention to this matter would be appreciated.

Sincerely,

Timothy J. Conner  
Attorney

TJC:rg  
Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BUCH ENTERPRISES, 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:

JAY TODD BUCH

(Contact Person)

BUCH ENTERPRISES, LLC

(Firm/Company)

80 Island Estates Parkway

(Address)

Palm Coast, FL 32137

(City/State and Zip Code)

For further information concerning this matter, please call:

Jay Todd Buch

386

888-7900

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

**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



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: BUCH ENTERPRISES, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L15000052076

3. The date this member/manager withdrew/resigned or will withdraw/resign is: on filing.

4. I, CATHERINE BUCH, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

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)

FILED  
19 OCT 28 AM 10:44  
STREET 1100 N. TALLAHASSEE, FLORIDA