L15000093011

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	⇒ #)		
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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SECRETARY OF STATE
ASSEE, FLORID



COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Barnwood Empire	LLC
(Name of Li	nited Liability Company)
The enclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
Vidar Saetre	
(Contact Person)	
(Firm Company)	
3756 Allenwood Street	
(Address)	
Sarasota, Florida 34232	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call;
Vidar Saetre	at () 941-266-5666
(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: 100
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

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)

of State is:2. The Florida docu		ssigned to this limited liability con	mpany is:	 -
L15000093	3011			
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is: _	07/22/2	2015
4. I. Vidar S	aetre	, hereby withdraw/resign as a	a	
	ame of Person Resigning)	·		
VPM				
	Print Titles			
resignation in wr	_ / .	ne limited liability company has be	en notified	of my
-	\$25.00 (Required) \$30.00 (Optional)		SECRETARY O TALLAHASSEE	15 JUL 24 A