416000107671

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Consideration to Fill Office					
Special Instructions to Filing Officer:					

Office Use Only



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2021 SEP 23 PH 1: 12 SECRE (ABOUT 95 1: 1) FE TALL (BLASS SEE, FILE

COVER LETTER

-	gistration Section rision of Corporations	
SUBJECT	Bulk Nation Countryside LLC	
SUBJECT		imited Liability Company)
The enclose	ed member, resignation or diss	ociation and fee(s) are submitted for filing.
Please retu	rn all correspondence concerni	ng this matter to:
Jonathan Dra	ke	
	(Contact Person)	
Bulk Nation	LLC	
	(Firm/Company)	
3110 53rd A	ve E	
	(Address)	
Bradenton, F	lorida - 34203	
	(City/State and Zip Code)	
For further	information concerning this m	atter, please call:
Chadwick W	ilton	941 306-9105 at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed p ■ \$25 Fili		e to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
	ling Address:	Street Address:
-	gistration Section rision of Corporations	Registration Section Division of Corporations
P.O). Box 6327 lahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	,	Tallahassee, FL 32303



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)

	Nation Countryside LLC	s it appears on the records o	·	
2. The Florida docu	ument/registration number a	ssigned to this limited liabil	lity company is:	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resi	gn is: September 23, 2021	
4. I, Chadwick Wilton (Print Name of Person Resigning)		, hereby withdraw/resign as a		
AMBR - Authoriz				
	(Print Title)			
of this limited lia resignation in wr	- ·	he limited liability company	has been notified of my SECRETARY TALLAHA	
Signature of Di	ssociating Member or Resig	gning Manager	•	
	\$25.00 (Required) \$30.00 (Optional)		PH 1:12 PE DITE	