L16000120595

(Re	equestor's Name)	
(Ad	Idress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: B&C Creations UC (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:
Sharon Rodriguez (Contact Person)
B&C Creations LLC
3879 Gulfstream ld.
Falm Springs FL 3346) City/State and Zip Code)
For further information concerning this matter, please call:
Sharon Rodniguez at (50) 352-6869 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$\Bigsquare\$ \$55 Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 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 li	ability company as it appears on the records of the Florida Department
of State is:BJC	Creations LLC
2. The Florida document/reg	istration number assigned to this limited liability company is:
L16000120	595
3. The date this member/mar	nager withdrew/resigned or will withdraw/resign is: $8/28/2020$
4. I. Matthew Ca	hereby withdraw/resign as a son Resigning
Manage/	
	pany and affirm the limited liability company has been notified of my
Signature of Discociating	Member or Resigning Manager
	(Required)
Certified Copy: \$30.00	O(Optional)