

L16000137598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

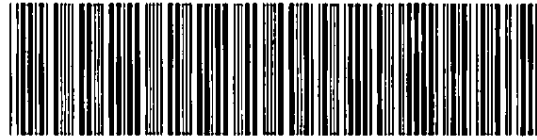
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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06/16/17--01014--017 **85.00

STATE OF FLORIDA
TALLAHASSEE

2017 AUG 21 PM 1:40

FILED

AUG 23 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sandy Beach Vacation Rentals 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:

Carrie Bingham
(Contact Person)

Sandy Beach Vacation Rentals LLC
(Firm/Company)

226150th Ave
(Address)

Madeira Beach FL 33708
(City/State and Zip Code)

For further information concerning this matter, please call:

Carrie Bingham at (727) 808 0272
(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

June 19, 2017

CARRIE A BINGHAM
226 150TH AVE
MADEIRA BEACH, FL 33708

SUBJECT: SANDY BEACH VACATION RENTALS LLC
Ref. Number: L16000137598

We have received your document for SANDY BEACH VACATION RENTALS LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 517A00012401

FILED

2017 AUG 21 AM 10:25

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ATTN: Jenna Harris

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2017 AUG 21 PM 1:40

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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: Sandy Beach Vacation Rentals LLC

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

L16000137598

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/1/17

4. I, Mark Bingham, 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.

Mark Bingham

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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