L16000198722

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
(Only State / Epit Holle #)				
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COVER LETTER

~	stration Section sion of Corporations					
SUBJECT:	GC Land Holdings, LLC					
50202011	(Name of Lin	(Name of Limited Liability Company)				
The enclosed	d member, resignation or dissoci	ation and fee(s	s) are submitted for filing.			
Please return	all correspondence concerning	this matter to:				
Christina A	nton Garcia					
	(Contact Person)		_			
Anton Gard	cia					
	(Firm/Company)		_			
106 South	Tampania Avenue					
	(Address)		-			
Tampa, Flo	orida 33609					
	(City/State and Zip Code)		_			
For further in	nformation concerning this matte	er, please call:				
Christina G	arcia	813 at (907-9807			
(N	ame of Contact Person)		& Daytime Telephone Number)			
Enclosed ple \$25 Filing	ase find a check made payable to g Fee		Department of State for: Fee & Certified Copy			
Registration (Division of C Clifton Build 2661 Executi	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

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)

	limited liability company as it a		Florida Department
2. The Florida doc	ument/registration number assigr	ned to this limited liability co	mpany is:
L1600019872	2		
3. The date this me	mber/manager withdrew/resigne	- d or will withdraw/resign is:	04/11/2019
4. I, John S. Castro, hereby withdraw/resign as, hereby withdraw/resign as			а
(Print N	lame of Person Resigning)	_,	u .
Member and	Manager		
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm the lin	nited liability company has b	een notified of my
Signature of Di	: 」をから、(AS ssociating Member or Resigning		
	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		