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(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)	 	
(Cit	ry/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nai	me)	
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		
	- 		

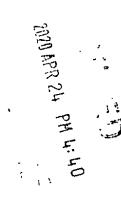
Office Use Only



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S TALLER



DS/Rosian

VALIDATION COVER SHEET

DATE: 4-24-CO	
PLEASE VALIDATE:	
CREATE NEW SCAN SH	IEET:
NEED TRACKING NUW	IBER:

RETURN TO:

Amend ments

SPECIAL NOTES:

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BGS Marine Sales Liv (Name of Limited Liability Company)	C -
(Name of Limited Liability Company)	
The enclosed member, resignation or dissociation and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matter to:	
DAN J. BOKLAGE (Contact Person)	
(Contact Person)	
	04/06/20 - 01018-01
(Firm/Company)	~ 75
PENSACOLA, FI 32505	GZ 7
(Address)	
PENSACOLA, FI 32505	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Dan Bokkrye at G72 86. (Name of Contact Person) (Area Code & Day	37-0312
(Name of Contact Person) (Area Code & Day	rtime Telephone Number)
Enclosed please find a check made payable to the Florida Departi	
	Address:
_	stration Section
	ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

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	e limited liability company a	as it appears on the records of the Florida D	epartment
of State is:	365 Marine	der, le	
2. The Florida doc	ument/registration number a	assigned to this limited liability company is	3:
**	00 29 697	 .	
3. The date this me	ember/manager withdrew/re	esigned or will withdraw/resign is: 2/15	120
4. I. Biccy	Swice	, hereby withdraw/resign as a	
Vice Pa	esident MABR	, hereby withdraw/resign as a	
	(Print Title)		
of this limited lia resignation in w		he limited liability company has been notif	ied of my
Signature of D	issociating Member or Resi	gning Manager	
	\$25.00 (Required)		202
Certified Copy:	\$30.00 (Optional)		20 AP