

L1700032877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:



300304444983

10/17/17--01005--019 \*\*24.00

FILED  
17 OCT 16 AM 7:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

2017 OCT 16 AM 8:16

TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** B & L Properties Pensacola, 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:

Darryl Touchstone

\_\_\_\_\_  
(Contact Person)

B & L Properties Pensacola, LLC

\_\_\_\_\_  
(Firm/Company)

9100 Baldrige Dr APT 7210

\_\_\_\_\_  
(Address)

Pensacola, FL 32514

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Darryl Touchstone

\_\_\_\_\_  
(Name of Contact Person)

850 712-8457  
at ( )

\_\_\_\_\_  
(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

**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: B + L Properties Persnack

2. The Florida document/registration number assigned to this limited liability company is: L17000032877

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 17 OCT 16 AM 7:49

4. I, Laurie Fulton, hereby withdraw/resign as a  
(Print Name of Person Resigning)

V.P.  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]  
Signature of Dissociating Member or Resigning Manager

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