117000033499

(Re	questor's Name)			
(Ad	dress)			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	Certificates	s of Status		
	_			
	<u> </u>			
Special Instructions to	Filing Officer:			

Office Use Only



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¥ SULKER \$EP 2 5 2019

COVER LETTER

TO: Registration Section Division of Corporations

Bayside Banners LLC				
SUBJECT: (Name of Limited Liability Company)				
The enclosed member, resignation or d	issociation and fee(s)	are submitted for filing.		
Please return all correspondence conce	rning this matter to:			
Jason Sexton				
(Contact Person)		-		
Bayside Banners LLC				
(Firm Company)				
1120 CARLTON ROAD				
(Address)		-		
TARPON SPRINGS, FL 34689				
(City State and Zip Code	,	-		
For further information concerning this	s matter, please call:			
Rex Platte	727 at f	265-1226		
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)		
Enclosed please find a check made pay ■ \$25 Filing Fee		epartment of State for: Fee & Certified Copy		
STREET/COURIER ADDRESS:		MAILING ADDRESS:		
Registration Section		Registration Section		
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327		
2661 Executive Center Circle		Tallahassee, Florida 32314		

CR2E079 (2/14)

Tallahassee, Florida 32301



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 appears on the records of the I side Banners LLC	florida D	epart
	ument/registration number assigned to this limited liability co	mpany is	•
L1700003349	9 ·	77.0	30.
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:	9-12-20	10 P
4. I. Rex Platte	, hereby withdraw/resign as	a	
(Print 8	, hereby withdraw/resign as same of Person Resigning)		7
Member			0 9
<u> </u>	(Print Title)	-:1-1	97
of this limited lia resignation in wr	bility company and affirm the limited liability company has biting.	een notif	ied o
	726/L		
Signature of D	issociating Member or Resigning Manager		
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		