0000 61157

(Requestor's Name)	118788 8500 8700 8000 800 80
(Address)	000
(Address)	
(City/State/Zip/Phone #)	12/1
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	
	K SALY DEC 1 4 2017



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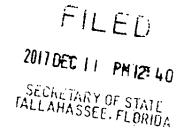
2/17--01019--025 **25.00

2017 DEC 11 PM 12: 40

COVER LETTER

	ration S	ection brporations	
SUBJECT:	Florida	Outdoor Creations, LLC	
SUBJECT: _		(Name of Limited Liability Com	ppany)
The enclosed	member	resignation or dissociation and fee(s	are submitted for filing.
Please return a	all corre	 spondence concerning this matter to: 	
Justin Famiç	glietti		
		(Contact Person)	-
Florida Outd	loor Cr	 eations, LLC	
		(Firm/Company)	
346 South P	almetto	Ave.	
-		1 (Address)	-
Daytona Bea	ach, FL	32114	
	(C	ity/State and Zip Code)	-
For further in	formatio	 on concerning this matter, please call: 	
Justin Fami	glietti	978 at (393-6149
(Na	me of C	ontact Person) (Area Code	& Daytime Telephone Number)
Enclosed plea □ \$25 Filing		a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy	
STREET/CO Registration S		 RADDRESS: 	MAILING ADDRESS: Registration Section
Division of C		 ons	Division of Corporations
Clifton Build	ing		P.O. Box 6327
2661 Executi Tallahassee, l		11	Tallahassee, Florida 32314
rananassee, i	riorida i	52301 	
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)

4.60	
1. The name of the lin	nited liability company as it appears on the records of the Florida Department
of State is:	Outdoor Creations, LLC
2. The Florida docum	trit/registration number assigned to this limited liability company is:
L17000061153	
3. The date this memb	er/manager withdrew/resigned or will withdraw/resign is:
4. I	, nereby withdraw/resign as a
(Print Name	of Person Resigning)
MBR	
(Pri	nt Title)
of this limited liabili	ty company and affirm the limited liability company has been notified of my
resignation in writin	g.
Tool	To the same of the
Signature of Disso	ciating Member or Resigning Manager
Filing Fee:	 \$25.00 (Required)
Certified Copy:	\$30.00 (Optional)