## 117000069247

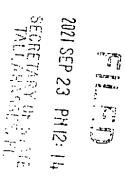
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(-1,7,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Cartification of Status						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
<u></u>						

Office Use Only



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09/29/25-0101.--001 \*\*329.00



## **COVER LETTER**

TO:	_	stration Section				
	Divis	sion of Corporations				
SUBJ	IECT:	Bulk Nation St Cloud LLC				
		(Name of L	mited Liab	ility Con	npany)	
The e	nclosed	d member, resignation or disso	ciation ar	nd fee(s	s) are submitted for filing.	
Please	e returr	all correspondence concerning	g this ma	tter to:		
Jonath	an Drak	e				
		(Contact Person)		- <u>-</u>	_	
Bulk N	Nation L	LC				
		(Firm/Company)			_	
3110 5	3rd Ave	Ε				
		(Address)			_	
Brader	nton, Flo	orida - 34203				
		(City/State and Zip Code)			_	
For fu	ırther i	nformation concerning this ma	tter, pleas	se call:		
Chadw	vick Wil	ton		941	306-9105	
	(N	lame of Contact Person)	(Arc	ea Code	& Daytime Telephone Number)	
Enclo	sed ple	ease find a check made payable	to the Fl	orida D	Department of State for:	
<b>■</b> \$2	5 Filin	g Fee	□ \$5:	5 Filing	g Fee & Certified Copy	
	<u>Mailir</u>	ng Address:			Street Address:	
	Registration Section			Registration Section		
		sion of Corporations			Division of Corporations	
		Box 6327 hassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
	rana	111assce, FL 32314			Tallahassee, FL 32303	



## 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		·			
2. The Florida doc L17000069247	ument/registration number a	ssigned to this limited lia	ibility company is:			
3. The date this mo	ember/manager withdrew/res	signed or will withdraw/re	esign is: September 23, 2021			
4. I, Chadwick Wilto	n lame of Person Resigning)	, hereby withdraw/resign as a				
AMBR - Authoria						
	(Print Title)					
of this limited lia resignation in wr	bility company and affirm thiting.	ne limited liability compa	my has been notified of my			
	4		202 SEC			
Signature of D	issociating Member or Resig	ning Manager	I SEP 23			
_	\$25.00 (Required) \$30.00 (Optional)		3 PH 2			