

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**L17000119030403**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : JOHN M WICKER PA  
Account Number : I20070000104  
Phone : (239) 939-2222  
Fax Number : (239) 939-2280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: MWICKER@LAWFIRM.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
COASTAL INTERIOR DESIGN LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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MAY 02 2017  
J. HARRIS  
Help



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: Coastal Interolr Design LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L17000090403
3. The date this member/manager withdrew/resigned or will withdraw/resign is: April 28, 2017
4. I, Karla M Whitney, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Manager  
(Print Title)

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

Karla M Whitney  
Signature of Dissociating Member or Resigning Manager

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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