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State/Zip/Phone	#)				
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(Document Number)					
Certificates	of Status				
Special Instructions to Filing Officer:					
	WAIT mess Entity Nam ment Number) Certificates				





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08/24/2021 JH



COVER LETTER

TO:	Regis	stration Section			
	Divis	ion of Corporations			
SUBJ	ECT:	B&B OUTFITTERS LLC			
		(Name of	Limited	Liability C	Company)
The e	nclosed	I member, resignation or dis-	sociatic	n and fee	e(s) are submitted for filing.
Pleaso	e return	all correspondence concern	ing this	matter t	0:
CORE	Y ADA	MS			
	•	(Contact Person)		•	
в&в с	OUTFIT	TERS LLC			
	-	(Firm/Company)			
3402 S	s.w. AD	AMS RD			
		(Address)			*************************************
ARCA	.DIA, FI	. 34266			
		(City/State and Zip Code)			
For fi	arther i	nformation concerning this r	natter, j	please ca	di:
CORE	Y ADA	MS	al	863	990-0304
	(N	Jame of Contact Person)	u	(Area Co	ode & Daytime Telephone Number)
Enclo	sed ple	ease find a check made payal	ble to th	ne Florida	a Department of State for:
= \$2	5 Filin	g Fee] \$ 55 Fil	ing Fee & Certified Copy
	<u>Maili</u>	ng Address:			Street Address:
	Regi	stration Section			Registration Section
		sion of Corporations			Division of Corporations
		Box 6327			The Centre of Tallahassee
	Talla	ihassee, FL 32314			2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

CR2E079 (2/14)



FILED

2021 AUG 12 AM 10:53

SECRETARY OF STATE TALLAHASSEE, FLORE

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)

	OUTFITTERS LLC	ssigned to this limited liability company is:
1.17000187213	imenoregistration number a	ssigned to this infinted hazarity company is.
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is: 7/26/21
MINI CLANGERAD ACU		
Print N	ame of Person Resigning)	, hereby withdraw/resign as a
AUTHORIZED N	1EMBER, AMBR	
	(Print Title)	
of this limited lia resignation in wr		he limited liability company has been notified of my
Signature of Di	ssociating Member or Resig	gning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	