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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	WESLEY CHAPEL STAND-UP PADDLE, LLC., I	DBA DESTINATION PADDLE
	(Name of Limited Liability C	ompany)
The e	nclosed member, resignation or dissociation and fee	e(s) are submitted for filing.
Please	e return all correspondence concerning this matter to	o:
SERG	IO ANTONIO GOODRIDGE	
	(Contact Person)	
DEST	INATION PADDLE	
	(Firm/Company)	
30448	PECAN VALLEY LOOP	
	(Address)	
WESL	EY CHAPEL, FL 33543	202 Ser
	(City/State and Zip Code)	ALL ALL
For fu	orther information concerning this matter, please cal	
SERG	IO ANTONIO GOODRIDGE 719	de & Daytime Telephone Number)
		de & Daytime Telephone Number)
	sed please find a check made payable to the Florida 5 Filing Fee \$55 Fili	Department of State for:
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 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)

1. The name of the limited liability company as i of State is: WESLEY CHAPEL STAND-UP PADDI	it appears on the records of the Florida Department LE, LLC
2. The Florida document/registration number ass	signed to this limited liability company is:
3. The date this member/manager withdrew/resig	gned or will withdraw/resign is: 31 JAN 2021
4, I, BROOK WHETSEL (Print Name of Person Resigning) AUTHORIZED MEMBER (AMBR)	, hereby withdraw/resign as a
(Print Title)	
of this limited liability company and affirm the resignation in writing. Signature of Dissociating Member or Resign Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	ing Manager ALL ARR 25 PH L