118000/8/677

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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D CUSHING

COVER LETTER

	•		
TO: Registration Section Division of Corporations			
SUBJECT: Bucata LLC			
(Name of Lim	ited Liability Company)		
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to:		
Lisa H. Parboni			
(Contact Person)			
Bucatalle			
(Firm/Company)			
572 Columbia Ave			
(Address)			
Altamonk Springs FL 32714 (City/State and Zip Code)			
(City/State and Zip Code)		. 4	
For further information concerning this matter	r, please call:	<u>3</u>	;
Lisa Carboni	at (386) 804-7511	SHAY IS PH	. 5
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	P	
Enclosed please find a check made payable to \$25 Filing Fee			C.ATIONS
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section Division of Corporations	Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327		

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



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: Bucata LLC	
2. The Florida document/registration number	assigned to this limited liability company is:
L 18000 1816 77	
3. The date this member/manager withdrew/i	esigned or will withdraw/resign is: 5/10/2019
4.1, Mathew Waynes (Print Name of Person Resigning)	, hereby withdraw/resign as a
Member (Print Title)	19 × × × × × × × × × × × × × × × × × × ×
of this limited liability company and affirm resignation in writing.	the limited liability company has been notified of iny
Matter Heyn	를 하였다.
Signature of Dissociating Member or Res	signing Manager 空 着点

Filing Fee:

\$25.00 (Required)

Certified Copy:

\$30.00 (Optional)