## L18000204479

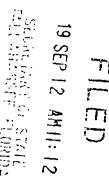
(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
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TRCHROEDER

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Blackcat Bay	
(Name of Limi	ited Liability Company)
The enclosed member, resignation or dissocia	ation and fee(s) are submitted for filing.
Please return all correspondence concerning t	this matter to:
Christen Hauenstein	
(Contact Person)	
Blackcat Bay LLC	
(Firm/Company)	
924 71 St	
(Address)	
Miami Beach Florida, 33141	
(City/State and Zip Code)	
For further information concerning this matte	er, please call:
Christen Hauenstein	305 815-1710
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to ☐ \$25 Filing Fee	the Florida Department of State for:  S55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (2/14)



## 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)

5.	5	is it appears on the records of the Florida Department
		assigned to this limited liability company is:
Michael Hiris	art	signed or will withdraw/resign is:
		he limited liability company has been notified of my
	issociating Member or Resig \$25.00 (Required)	gning Manager
	\$30.00 (Optional)	TO PROPRIE