## 118000267466

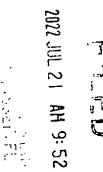
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

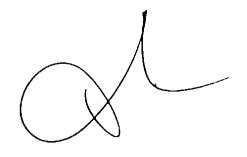
Office Use Only



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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
	Division of Corporation.			
SUBJ	Southwestern Shores, LLC			_
	(Name o	f Limited Liability Con	mpany)	
The e	nclosed member, resignation or dis	ssociation and fee(s	s) are submitted for filing.	
Please	e return all correspondence concert	ning this matter to:		
Joel A	. Threlkeld, Esq.			
	(Contact Person)		_	
Threlk	eld Law, P.A.			
	(Firm/Company)	<del></del>	-	20
3003	Famiami Trail N., Suite 400			2022 JUL 2 I
	(Address)		- ∴.	IL 21
Naples	s, Florida 34103		5) 13;	. A
	(City/State and Zip Code)	· ·		が 1.0 cm 円 1.0 cm 1.0
For fu	orther information concerning this	matter, please call:	( ***	, ,
Joel A	. Threlkeld, Esq.	239 at (	234-5034	
	(Name of Contact Person)		& Daytime Telephone Number)	_ I
	sed please find a check made paya 5 Filing Fee		Department of State for: g Fee & Certified Copy	
	-			
	Mailing Address:		Street Address:	
	Registration Section		Registration Section	
	Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite	<b>- 8</b> 10
	rananassee, rajudutt		Fars in monioc succe sum	- 010

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	it appears on the records of	of the Florida Department
of State is: South	western Shores, LLC		·
2. The Florida docu 1.18000267466	ument/registration number as	ssigned to this limited liabi	ility company is:
3. The date this me	mber/manager withdrew/res	igned or will withdraw/res	ign is:
4. I. Carolina Hou (Print N	iston ame of Person Resigning)	, hereby withdraw/res	sign as a
Manager and Men	·		
(	(Print Title)		
of this limited lial resignation in wri	oility company and affirm thiting.	ne limited liability company	y has been notified of my
$\bigcirc$ 1	w		2022 JUL 2
Signature of Di	ssociating Member or Resig	ning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		AH 9: 5