119000042281

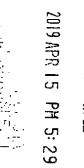
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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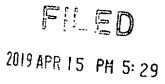
C. GOLDEN APR 2 4 2019

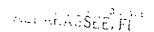
COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: BY THE SEA EVENTS	LLC			
(Name of Limited Liability Con	npany)			
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to:				
DONNETTE THEMAS (Contact Person)	-			
(Contact Petson)				
(Firm/Company)	-			
10578 SANDBURR CT (Address)				
(Address)				
THOMSON ILL 6/28-5 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
DONNETTE THEMAS al (815	590 7704			
(Name of Contact Person) (Area Code	& Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida D S25 Filing Fee S55 Filing	Repartment of State for: Fee & Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301	rananasco, i forida 22219			

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)

1. The name of the	limited liability company a	s it appears on the reco	ords of the Florida Department
of State is:	BY THE SEA	EVENTS	LLC.
2. The Florida docu	ament/registration number of	assigned to this limited	liability company is:
L 19000	015581		
3. The date this me	mber/manager withdrew/re	signed or will withdray	w/resign is: 4/10/19
	THEMAS (ame of Person Resigning)	, hereby withdra	w/resign as a
	AGER (Print Title)		
of this limited lial resignation in wri		he limited liability con	npany has been notified of my
Donnette	Themas		
Signature of Di	ssociating Member or Resi	gning Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		