

L19000287737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2020 APR 20 AM 11:33

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4/30/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coastal Wealth Advisory Services, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Gregory L. Money

(Contact Person)

Coastal Wealth Advisory Services, LLC

(Firm/Company)

1240 Stonehaven Court

(Address)

Lake Mary, FL 32795

(City/State and Zip Code)

For further information concerning this matter, please call:

Gregory L. Money

450

580-9807

at (_____) _____

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
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 it appears on the records of the Florida Department of State is: Coastal Wealth Advisory Services, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L19000287737

3. The date this member/manager withdrew/resigned or will withdraw/resign is: April 13, 2020

4. I, Karen L. Money, hereby withdraw/resign as a
(Print Name of Person Resigning)

Managing Member

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Karen L. Money
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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RESIGNATION OF MANAGING MEMBER

KNOW ALL MEN BY THESE PRESENTS, that I, KAREN L. MONEY, Managing Member of Coastal Wealth Advisory Services, LLC, a Florida limited liability company, do hereby resign as Managing Member of Coastal Wealth Advisory Services, LLC.

IN WITNESS WHEREOF, I have set my hand and seal to this 13th day of April, 2020.

Karen L. Money
KAREN L. MONEY

STATE OF Virginia
COUNTY OF Botetourt

Sworn to, acknowledged and subscribed before me this 13th day of April, 2020, by Karen L. Money who [☒] is personally known to me or who [☐] produced _____ as identification.

[Affix Notary Stamp or Seal below]



Amy A. Carter
Notary Public Signature

Amy A. Carter
Notary Public Printed/Typed Name

Expiration: June 30, 2024