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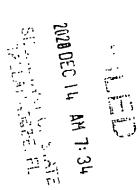
(Re	questor's Name)	-		
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PICK-UP	☐ WAIT	MAIL		
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O SIMMONS

JAN 28 2021

COVER LETTER

Div	ision of Corporations		
SUBJECT	BULK COMMODITIES LLC		
	(Name o	f Limited Liability Co	nmpany)
The enclose	ed member, resignation or dis	ssociation and fee((s) are submitted for filing.
Please retui	rn all correspondence concer	ning this matter to	:
JACOB FINI	KELSHTEYN		
	(Contact Person)		_
THE FINKE	LSHTEYN GROUP PA		
	(Firm/Company)		_
134 S. DIXII	E HWY #201		
	(Address)		
HALLANDA	ALE BEACH, FL 33009		
	(City/State and Zip Code)		
For further	information concerning this	matter, please call	:
JACOB FINI	KELSHTEYN	305 at (931-9212 1
(Name of Contact Person)		e & Daytime Telephone Number)
Enclosed pl	lease find a check made paya	ible to the Florida	Department of State for:
≡ \$25 Filii	ng Fee	□ \$55 Filin	ng Fee & Certified Copy
<u>Mail</u>	ling Address:		Street Address:
Reg	istration Section		Registration Section
	ision of Corporations		Division of Corporations
	. Box 6327 ahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 81
ा से । ।	anassee, 14, 54514		Tallahassee, FL 32303

TO: Registration Section



DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	the limited liability company as it app	ears on the records of the Florida Department	
	ocument/registration number assigned		
		or will withdraw/resign is: 12-01-2020	
4. 1. BULK COMMODITIES LTS			
MEMBER			
of this limited resignation in		ed liability company has been notified of my	
C6/1	-Hough		
Signature of	Dissociating Member or Resigning M	lanager	
Filing Fee:	\$25.00 (Required)		

Certified Copy:

\$30.00 (Optional)