12000243934

(Requestor's Name)			
(Address)			
(,			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Cartified Capies Continues of Status			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
3			



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Office Use Only

FLO DA CAPITAL COURIER SERVIC	CES. INC
*2330 CLARE DRIVE *TALLAHASSEE, FL 32309	,
(850) 524-5437	
(850) 524-6243	,
PLEASE USE FUNDS FROM THIS ACC AUTHORIZATION SIGNATURE:	COUNT: 120310000160 AMOUNT: \$25.00
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy of Articles of Incorp	poration
Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit	Amendment
Not for Profit	X Resignation of R.A. Officer/Director
Limited Liability	Change of Registered Agent
Domestication Other	Dissolution/Withdrawal Merger
CORP	Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
Fictitious Name	Limited Partnership Reinstatement
APOSTIL()	Other
Country	
EXAMINER'S INITIALS:	

TALLAHASSEE, FL 32309 (850) 524-5437	
(850) 524-6243 PLEASE USE FUNDS FROM THIS ACCO AUTHORIZATION SIGNATURE: Bastion Holdings LLC L2000026393 BUSINESS (Name)	- Quit
Wałk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy of Articles of Incorpo	ration
Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
ProtitNot for ProfitLimited LiabilityDomesticationOtherCORP	AmendmentXResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/WithdrawalMergerConversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
Fictitious Name	Limited PartnershipReinstatement
APOSTIL() Country	Other
EXAMINER'S INITIALS:	

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE

COVER LETTER

TO:	_	stration Section		
	Divis	sion of Corporations		
SUBJ	IECT:	BASTION HOLDINGS LLC		
		(Name of L	imited Liability Co	mpany)
The e	nclose	d member, resignation or disso	ociation and fee(s) are submitted for filing.
Please	e returr	all correspondence concernir	ng this matter to:	:
JASON	S GUIL	D		
		(Contact Person)		-
PARG	ON INI	ERNATIONAL TRANSACTIONS	LLC	
		(Firm/Company)		-
13814	SIGLEI	R STREET		
		(Address)		_
RIVE	RVIEW	FL 33579		
		(City/State and Zip Code)		_
For ft	irther i	nformation concerning this ma	atter, please call:	:
JASOI	N GUIL	D	202 at (643-6876
	(i)	Vame of Contact Person)	(Area Code	e & Daytime Telephone Number)
Enclo	sed ple	ease find a check made payabl	e to the Florida	Department of State for:
\$ 2	5 Filin	g Fee	□ \$55 Filin	ig Fee & Certified Copy
		ng Address:		Street Address:
	-	stration Section		Registration Section
		sion of Corporations Box 6327		Division of Corporations The Centre of Tallahassee
		ahassee, FL 32314		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)

	limited liability company as it a		of the Florida Department
2. The Florida doc	ument/registration number assig	ned to this limited liab	ility company is:
	ember/manager withdrew/resign	ed or will withdraw/res	sign is:
4. I. ROGER MONTERO , hereby withdraw/resigning), hereby withdraw/resigning)			sign as a
MANAGER	·		
-	(Print Title)		
of this limited lia resignation in w	bility company and affirm the li iting.	mited liability compan	y has been notified of my
To ton			. ~
Signature of D	issociating Member or Resignin	g Manager	2922 A.S
	\$25.00 (Required)		.!
Certified Copy:	\$30.00 (Optional)		*