

L20000377194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

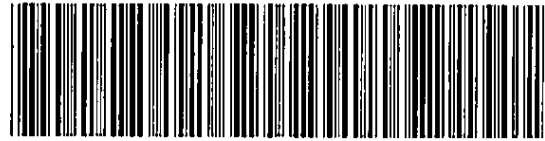
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500393787865

03/08/22--01001--004 **25.00

RECEIVED

2022 SEP -7 PM 3:00

FILED

2022 SEP -7 AM 9:15

STATE OF ALABAMA
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SITTING ON THE BAY, 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:

STACY SMALL

(Contact Person)

SMITH THOMPSON SHAW

(Firm/Company)

3520 THOMASVILLE ROAD - 4TH FLOOR

(Address)

TALLAHASSEE, FL 32309

(City/State and Zip Code)

For further information concerning this matter, please call:

STACY SMALL

at (850) 893-4105

(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



FILED

2022 SEP -7 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FL

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)

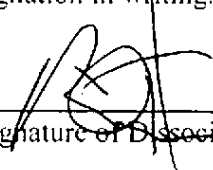
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Sitting on the Bay, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L20000377194

3. The date this member/manager withdrew/resigned or will withdraw/resign is: September 6, 2022

4. I, Michael Xifaris, hereby withdraw/resign as a
(Print Name of Person Resigning)
Manager and Member
(Print Title)

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

 9/7/2022
Signature of Dissociating Member or Resigning Manager

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