[21000019142

(Red	uestor's Name)			
(Add	ress)			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Statu	s		
Special Instructions to Filing Officer:				
umit				

Office Use Only



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COVER LETTER ,

TO:	_	stration Section		
	Divis	sion of Corporations		
SUBJI	ECT:	Island Coast Trading LLC		
		(Name of Lin	nited Liability Cor	mpany)
The en	closed	d member, resignation or dissoc	ciation and fee(s	s) are submitted for filing.
Please	returr	all correspondence concerning	g this matter to:	
Trevor	Mackel	llar		
	-	(Contact Person)		_
Island (Coast T	rading LLC		
••••		(Firm/Company)		_
2118 SV	W 23rd	Court		
		(Address)		
Cape C	oral, Fl	L 33991		
		(City/State and Zip Code)		_
For fu	rther i	nformation concerning this ma	tter, please call:	
Trevor	Macke	llar	239 at (878-1988
	(N	lame of Contact Person)	(Area Code	e & Daytime Telephone Number)
Enclos	sed ple	ease find a check made payable	to the Florida I	Department of State for:
\$25	_			g Fee & Certified Copy
	Maili	ng Address:		Street Address:
		stration Section		Registration Section
		sion of Corporations		Division of Corporations
		Box 6327		The Centre of Tallahassee
	Talla	hassee, FL 32314		2415 N. Monroe Street, Suite 810
				Tallahassee, FL 32303

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 as it apports of State is:	ears on the records of the Florida Pepartment
2. The Florida document/registration number assigned L21000019142	$m_{\odot} = \frac{\theta}{2}$
3. The date this member/manager withdrew/resigned	or will withdraw/resign is:
Barry Fazio	hereby withdraw/resign as a
Title Authorized Member, Co-Trustee	
(Print Title)	
of this limited liability company and affirm the limit resignation in writing.	ted liability company has been notified of my
Signature of Dissociating Member or Resigning N	1anager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	