# h21000430042

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

Office Use Only



300381451623

02/11/22--01011--013 \*\*25.00



O SIMMONS FEB 2 3 2022

#### **COVER LETTER**

TO:	Regis	stration Section	•		• •
	Divis	ion of Corporations			
SUBJ	ECT:	Bay Coast Grading and Excavati			
		(Name of	Limited	Liability Co	ompany)
The er	nclosed	I member, resignation or dis	sociatio	on and fee	e(s) are submitted for filing.
Please	return	all correspondence concern	ing this	s matter to	):
Jeffrey	Dowd				
		(Contact Person)			
The La	w Offic	e of Jeffrey Dowd, PA			
		(Firm/Company)			
156 W.	. Robert	son St.			
		(Address)			
Brando	on, FL 33	3511			
	-	(City/State and Zip Code)			_
For fu	rther in	nformation concerning this n	natter, j	please cal	1:
Jeffrey	Dowd		at	813	773-3529
	(N	ame of Contact Person)		(Area Coc	de & Daytime Telephone Number)
Enclos	sed ple	ase find a check made payat	ole to th	ne Flo <del>ri</del> da	Department of State for:
	5 Filing	• •			ng Fee & Certified Copy
		ng Address:			Street Address:
	_	stration Section			Registration Section
		ion of Corporations			Division of Corporations
		Box 6327			The Centre of Tallahassee
	Talla	hassee, FL 32314			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



### FILED

2022 FEB 11 AM 7: 30

SECRETARY OF STATE TALLAHASSEE, FT.

### 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	e limited liability company as it	appears on the records of the	Florida Department	
of State is: Bay	Coast Grading and Excavating of Flori	da LLC		
2. The Florida doc 1.21000430042	cument/registration number assig	gned to this limited liability co	ompany is:	
3. The date this mo	ember/manager withdrew/resign	ed or will withdraw/resign is:	1/20/2022	
4. l, Michael Bradley	Name of Person Resigning)	_, hereby withdraw/resign as a		
Manager				
<del></del>	(Print Title)			
of this limited lia resignation in w	ability company and affirm the liriting.	imited liability company has b	peen notified of my	
Micho	el Bradley			
Signature of D	issociating Member or Resignin	g Manager		
	\$25.00 (Required)			
Ceruneu Copy:	\$30.00 (Optional)			