L2200001196

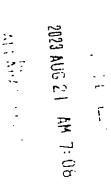
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(00	ocument Number)	
(50	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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08/21/23--01015--005 **25.00





COVER LETTER

SUBJECT: Bay Ara Aluminum LLC (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Brandon Letchworth (Contact Person)
Bay Area Aluminum LLC (Firm/Company)
5944 luy Branch Ln (Address)
19 Kelend, FL 33810 (City/State and Zip Code)
For further information concerning this matter, please call:
Brandon Letenworth at (863) 860-0752 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sum_\$ \$25 \text{Filing Fee} \sum_\$ \$55 \text{Filing Fee & Certified Copy}

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

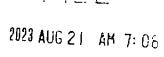
Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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TO:

Registration Section





TATTATASSIT OF CO.

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:	Pay Area Aluminum LLC
2. The Florida docι	ment/registration number assigned to this limited liability company is:
L22000	061196
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: $8/16/23$
	iame of Person Resigning), hereby withdraw/resign as a
<u></u>	MBR (Print Title)
of this limited liab resignation in wri	pility company and affirm the limited liability company has been notified of my iting.
i.	Finns
Signature of Di	ssociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)