## L2200136663

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
	J. H <sup>C</sup> APR	<sub>ORNE</sub> -7 2023

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MILAHASSEE

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## **COVER LETTER**

Registration Section Division of Corporations

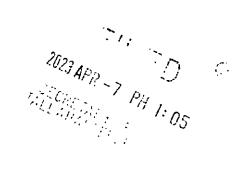
TO:

CR2E079 (2/14)

SUBJECT: Coastal Concepts 3 Design 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:
Stephanie Hurtey (Contact Person)
Coastal Concepts & Design LLC
117 Henry Ave. PCB FL, 32413
PCBFL, 32413 (City/State and Zip Code)
For further information concerning this matter, please call:
Stephonie Hurley (504) 339 0230 (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 \$\Bigsquare\$ \$55 Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 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)

1. The name of the	limited liability compa-	ny as it appears on the records of the Florida Department
of State is: <u>Co</u>	astal Conce	epts & Design LLC
2. The Florida docu	ment/registration numl	ber assigned to this limited liability company is:
L220001		
3. The date this me	mber/manager withdrev	w/resigned or will withdraw/resign is: $\frac{3/13/2023}{}$
41 Russel	Keith	hereby withdraw/resign as a
(Print N	ame of Person Resigning)	, hereby withdraw/resign as a
Manage	(Print Title)	
	Print Title)	<del></del>
of this limited liab resignation in wri		rm the limited liability company has been notified of my
Runk	<del></del>	
Signature of Di	ssociating Member or F	Resigning Manager
Filing Fee:	\$25.00 (Required)	
	\$30.00 (Optional)	