Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000011218 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : WATSON SLOANE PLLC

Account Number : I20150000117 Phone : (407)622-6751 Fax Number : (856)440-1211

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN []. BASIN 22 ENVIRONMENTAL MITIGATION BANK, LLC-

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help



## 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)

BASI	limited liability company as	it appears on the records of the GATION BANK, LLC	Florida Dep	partment
2. The Florida docu 1.22000319167	ument/registration number as	ssigned to this limited liability or	ompany is:	
3. The date this me HUGH CORRI 4. I. PARTNERSHII	GAN III, FAMILY LIMITED	igned or will withdraw/resign is		24
(Print N MEMBER	ame of Person Resigning) (Print Title)		: <b>-</b>	2025 J <i>i</i>
•	bility company and affirm th	ne limited liability company has	:- been notifie	<u>=</u> ा ज <b>्</b> षि wk= == ⊥
Signature of Di	issociating Member or Resig	ming Manager	7 2 7 7 2 7 1 - 7 1	10:31
<b>~</b>	\$25.00 (Required) \$30.00 (Optional)			