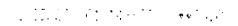
L22000343057

(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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2023 FTB -3 AM 8: 19

COVÉR LETTER

TO: Registration Section Division of Corporations

BLUE SKIES DEVELOPMENT,	LLC	
SUBJECT:(Name of I	Limited Liability C	ompany)
The enclosed member, resignation or diss	ociation and fee	(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to);
FRANK L MILLER III		
(Contact Person)		_
BLUE SKIES DEVELOPMENT, LLC		
(Firm/Company)		_
248 STONE HARBOUR RD		
(Address)		
VINTER SPRINGS, FL. 32708		
(City/State and Zip Code)		
For further information concerning this m	atter, please cal	l :
FRANK I. MILLER III	689	345-3735
(Name of Contact Person)	at ((Area Coo) le & Davtime Telephone Number
Enclosed please find a check made payable		

Mailing Address:

☐ \$25 Filing Fee

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

■ \$55 Filing Fee & Certified Copy

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



2023 FEB -3 AM 8: 20

FLORIDA DEPARTMENT OF STATE A MASSEE, FL DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	Elimited liability company as it	appears on the records of the Florida Department
		·
2. The Florida doc 1.22000343057	ument/registration number assig	ned to this limited liability company is:
		 01/16/2023
3. The date this me FRANK LMILI	_	ed or will withdraw/resign is:
4. I.		hereby withdraw/resign as a
AMBR	Name of Person Resigning)	
	(Print Title)	
		mited liability company has been notified of my
resignation in wr	ា់ពេទ្ធ	
Mak;	Mille III	
Signature of D	issociating Member or Resignin	g Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	