

L 23000218854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

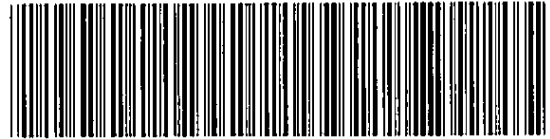
(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 40 Gulfview, 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:

Eric Geen  
(Contact Person)

40 Gulfview, LLC  
(Firm Company)

28 Basil St  
(Address)

Inlet Beach, FL 32461  
(City/State and Zip Code)

For further information concerning this matter, please call:

Eric Geen 813-694-456  
(Name of Contact Person) at (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

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



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: 40 Galtview, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
1,23000218854

3. The date this member/manager withdrew/resigned or will withdraw/resign is: December 29, 2023

4. I, Laura Harrell, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Manager  
*(Print Title)*

[Signature]  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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