

# L24000198523

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

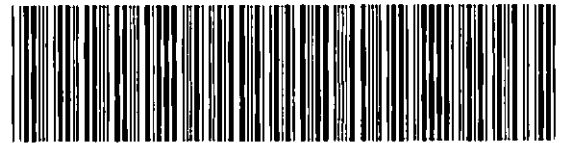
\_\_\_\_\_  
(Document Number)

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JUN 28 2024

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JUL 17 2024

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** COASTAL HOME TRANSFORMATIONS 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:

VIC JUSKA

\_\_\_\_\_  
(Contact Person)

COASTAL HOME TRANSFORMATIONS LLC

\_\_\_\_\_  
(Firm/Company)

16806 LISBON AVE

\_\_\_\_\_  
(Address)

PANAMA CITY BEACH FL 32413

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

VIC JUSKA

\_\_\_\_\_  
(Name of Contact Person)

at ( 231 ) 6204011  
\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

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

☐ \$25 Filing Fee

☒ \$55 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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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: COASTAL HOME TRANSFORMATIONS LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L24000198523
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/11/24
4. I, VOLODYMYR YATSIUK, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
MGR  
*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

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