

L17 000067639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

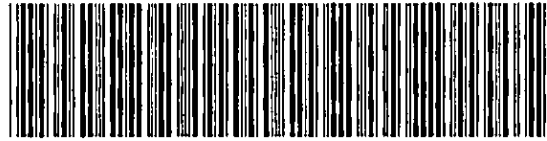
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/24/20--(1003--03) --2010

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2020 JAN 24 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Resignation

FEB 19 2020
I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SLCW Management, 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:

Aldo Beltrano

(Contact Person)

Beltrano & Associates

(Firm/Company)

4495 Military Trail Ste:107

(Address)

Jupiter, FL 33458

(City/State and Zip Code)

For further information concerning this matter, please call:

Aldo Beltrano at (561) 799-6577

(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 \$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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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SERIAL 11111111111111111111
TALLAHASSEE, FLORIDA

**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: SLCW Management, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L17000067639

3. The date this member/manager withdrew/resigned or will withdraw/resign is: January 13, 2020

4. I, Nicole Caputo, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager and Member
(Print Title)

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

 1/13/2020
Signature of Dissociating Member or Resigning Manager

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