L18000139453

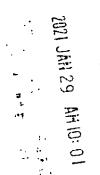
(Re	questor's Name)			
(Ad	dress)			
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
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O SIMMONS MAR 13 2021

COVER LETTER .

TO:	O: Registration Section Division of Corporations		
SUBJE	ECT:	1901 HOLDING LLC	
		(Name of L	imited Liability Company)
The en	closed	member, resignation or disso	ociation and fee(s) are submitted for filing.
Please	return	all correspondence concerning	ng this matter to:
Yariv S	haked		
		(Contact Person)	
		(Firm/Company)	
225 GO	LDEN	BEACH DR	
		(Address)	
Golden	Beach,	FL 33/60	
		(City/State and Zip Code)	
For fur	ther in	nformation concerning this ma	atter, please call:
	YAR	LIV SHAKED	_at (305) 6/0 7280
	(N	ame of Contact Person)	(Area Code & Daytime Telephone Number)
Enclose	ed ple	ase find a check made payabl	e to the Florida Department of State for:
\$25	Filing	g Fee	☐ \$55 Filing Fee & Certified Copy
		ng Address:	Street Address:
	_	stration Section	Registration Section
	Divis	ion of Corporations	Division of Corporations

The Centre of Tallahassee

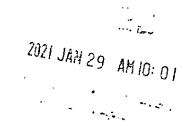
Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314





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)

	limited liability company a	s it appears on the records of the Florida Department
2. The Florida docu	ument/registration number a	ssigned to this limited liability company is:
L18000139453		
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:
4. I, Yair Toledano (Print Name of Person Resigning)		
(Print N	ame of Person Resigning)	
Manager		
	(Print Title)	
of this limited lial resignation in wr	2 /	he limited liability company has been notified of my
Signature of Di	ssociating Member or Resig	gning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	