

Florida Department of State

Division of Corporations
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(((H24000269625 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH, CORPORATE
Account Number : I20162000074
Phone : (407)839-4277
Fax Number : (407)839-4264

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LLC REGISTERED AGENT RESIGNATION
IWD, L.L.C.

Certificate of Status	0
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M. SOLOMON

AUG 12 2024

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STATE
DIVISION OF
CORPORATIONS
TALLAHASSEE, FL

Fax Audit No H124000269625 3

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Holly Collins

, hereby resigns as

Name of Registered Agent

Registered Agent for IWD, L.L.C.

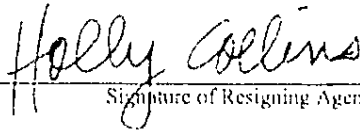
Name of Limited Liability Company

1.00000012243

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17 (2/14)

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 SECRETARY OF STATE
 TALLAHASSEE, FL 32314

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