# 10000000054

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
, , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special motional to 1 mmg amount
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2024 OCT 16 PM 3: 20

West Palm Beach, March 28, 2024.

Mr. Clive Russell, President

Quicklip LLC

2470 Victoria Point

West palm Beach, FL 33411

#### Dear Clive

Thank you for allowing me to be part of the Quicklip's developing phase.

Effective March 28, 2024 I resign my executive position, so that your new management team can take the company to the next phase: manufacturing, sale and distribution of Quicklip's Products.

Best Wishes for a great success in your endeavor.

Sincerely /

Márco Ghignone

مم المراجعة Torchio@

#### **COVER LETTER**

_	ion of Corporations		
SUBJECT:	Quicklip, LLC		
0000.011	(Name o	f Limited Liability Cor	npany)
The enclosed	l member, resignation or di	ssociation and fee(s	e) are submitted for filing.
Please return	all correspondence concer	ning this matter to:	
Clive Russell			
	(Contact Person)	-	=
Quicklip, LLC			
	(Firm/Company)		-
2470 Victoria F	?oint		
	(Address)		-
West Palm Bea	ch, FL 33411		
	(City/State and Zip Code)		-
For further in	nformation concerning this	matter, please call:	
Clive Russell		267 at (	259-2764
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed plea	ase find a check made paya	ble to the Florida D	Department of State for:
■ \$25 Filing			Fee & Certified Copy
<u>Mailin</u>	g Address:		Street Address:
•	tration Section		Registration Section
	ion of Corporations Box 6327		Division of Corporations The Centre of Tallahassee
	hassee, FL 32314		2415 N. Monroe Street, Suite 810
i aitai	11055CC, FL 52514		Tallahassee, FL 32303



### FILED

2024 OCT 16 PM 3: 20

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)

	e limited liability company as it appears on the records of the Florida Department lieklip, LLC
2. The Florida doc L06000060541	cument/registration number assigned to this limited liability company is:
	ember/manager withdrew/resigned or will withdraw/resign is: 3 - 28 - 2024  one, hereby withdraw/resign as a  Name of Person Resigning)
	(Print Title)
resignation in w	ability company and affirm the limited liability company has been notified of my riting.
	Pissociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Ontional)