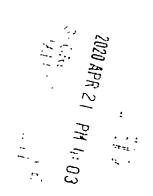
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O SIMMONS
MAY 01 2020

COVER LETTER

-	ion of Corporations	•	
SUBJECT:	W2 TEAM , LLC		
	(Name of Limited Liability Company)		
The enclosed	l member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
WU. SHI MIN	G		
	(Contact Person)		_
W2 TEAM , LI	LC		
	(Firm/Company)		_
18800 NE 29T	H AVE STE 10		
	(Address)		_
AVENTURA,	FL 33180		
	(City/State and Zip Code)		_
For further in	formation concerning this matte	r, please call:	
Yi Wei		305 at (778-1283
(Na	ame of Contact Person)	(Area Code	2 & Daytime Telephone Number)
Enclosed plea \$25 Filing	ase find a check made payable to Fee	o the Plorida I \$55 Filing	Department of State for: g Fee & Certified Copy
Regis: Divisi P.O. E	g Address: tration Section ion of Corporations Box 6327 nassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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 Departmen
2. The Florida doo	cument/registration number assigned to this limited liability company is:
4. I. <u>— CHEN, JIN XI</u>	April 15, 2020 ANG, hereby withdraw/resign as a Name of Person Resigning)
MGR	tante of Person Resigning)
	(Print Title)
of this limited li- resignation in w	ability company and affirm the limited liability company has been notified of my riting.
7	Xuy Mer
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)