L12000142329

(Requestor's Name)				
(Ad	dress)			
(Address)				
(Cit	y/State/Zip/Phone #)	, , , , , , , , , , , , , , , , , , , 		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Name)			
(, , , , , , , , , , , , , , , , , , ,			
(Do	cument Number)			
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		.		
Certified Copies	_ Certificates of	Status		
Special Instructions to	Filing Officer:			





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men/Resign. 8/18/22

COVER LETTER

TO:		stration Section		
	Divis	sion of Corporations		
SUBJ	ECT:	ATHENA FINE ART LLC		
		(Name o	f Limited Liability Co	ompany)
The e	nelosed	I member, resignation or dis	ssociation and feet	(s) are submitted for filing.
Please	e retorn	all correspondence concert	ning this matter to	:
АНМ	ED ANT	AR		
		(Contact Person)	-	 -
		(Firm/Company)		
601 NI	E 2ND I	ય.		
		(Address)		_
DANI	A. Ft. 33	1004		
	<u>-</u>	(City/State and Zip Code)		_
For fu	irther ii	nformation concerning this	matter, please call	:
АНМЕ	ED ANT	AR	305	915-9181
	(N	ame of Contact Person)	(Area Cod	e & Daytime Telephone Number)
Enclo:	sed ple	ase find a check made paya	ble to the Florida	Department of State for:
	5 Filing			ng Fee & Certified Copy
	Mailir	ng Address:		Street Address:
	Regis	tration Section		Registration Section
		ion of Corporations		Division of Corporations
		Box 6327		The Centre of Tallahassee
	i alla	hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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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)

1. The name of the	limited liability company as i	t appears on the records of the Florida Department
of State is: ATHL	NA FINE ART LLC	
2. The Florida docu 1.12000142329	iment/registration number ass	igned to this limited liability company is:
3. The date this me	mber/manager withdrew/resig	ned or will withdraw/resign is: 4/27/2022
4. 1. AHMED ANTAR (Print Name of Person Resigning)		
MANAGER	, , , , , , , , , , , , , , , , , , , ,	
	Print Title)	
of this limited liab resignation in wri		limited liability company has been notified of my
	A. A. tar	
Signature of Dis	ssociating Member or Resign	ing Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	