## 14000003292

(Re	equestor's Name)	
(Ad	idress)	
	ldress)	
(AC	idless)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
'	_	
-		· · · · · · · · · · · · · · · · · · ·
Special Instructions to	Filing Officer:	

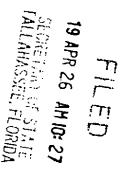
Office Use Only



600328152476

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K. SALY APR 29 2019

CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GLOBAL WAREH	HOUSE SOLUTIONS LLC		
	TO USE SOLUTIONS LLC	-	
<u></u>			
		-	
		<b> </b>	Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
		1	Art, of Amend, File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
		✓	Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search
	<b> </b>		Driving Record
Requested by: BA	4/26/19		UCC   or 3 File
Name	Date Time		UCC 11 Search
Walls In			UCC 11 Retrieval
Walk-In	Will Pick Up	<u></u>	Courier





## 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 as it appears on the records of the Florida Department all Warehouse Solutions LLC
	ument/registration number assigned to this limited liability company is:
L1400000329	<b>2</b>
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
Agran Alams	ND.
(Print !	hereby withdraw/resign as a  Mame of Person Resigning)
Manager	
	(Print Title)
resignation in w	
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Cartified Copy:	\$30.00 (Optional)