L16000212588

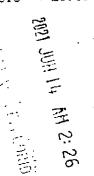
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COVER LETTER :

	stration Section sion of Corporations		
SUBJECT:	MAXWEST HOLDINGS, LLC	`	
	(Name o	f Limited Liability Co	mpany)
The enclosed	d member, resignation or di	ssociation and fee(s) are submitted for filing.
Please returi	all correspondence concer	ning this matter to:	
Kathy Riano-l	.opez. Esq.		
	(Contact Person)	· · · · · · · · · · · · · · · · · · ·	_
Riano & Assoc	ciates, LLC		
	(Firm/Company)	• • • • • • • • • • • • • • • • • • • •	_
9720 Stirling I	Road, Ste. 204C		
	(Address)		_
Cooper City, I	1. 33024		
	(City/State and Zip Code)		_
For further i	nformation concerning this	matter, please call:	
Kathy Riano-I	.opez	754 at (400-9896 }
(1)	Jame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed ple	ease find a check made paya	able to the Florida!	Department of State for:
= \$25 Filin	g Fee	☐ \$55 Filin	g Fee & Certified Copy
<u>Maili</u>	ng Address:		Street Address:
	stration Section		Registration Section
	sion of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
Talla	hassee, FL 32314		2415 N. Monroe Street, Suite 81

Tallahassee, FL 32303



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)

	ne limited liability company a	as it appears on the records of the Fl	lorida Dep	partment
2. The Florida do 1.16000212588	cument/registration number a	assigned to this limited liability con	npany is:	
	ember/manager withdrew/re	signed or will withdraw/resign is: _	May 21, 202	.1
	•	hereby withdraw/resign as a	1	
Authorized Men	tl'rim Fitles			
of this limited li- resignation in w	ability company and affirm thriting.	he limited fiability company has bee	en notified	
Thu			T. —	: 1 Hill 1808
Signature of E	issociating Member or Resig	ming Manager		
	\$25.00 (Required) \$30.00 (Optional)			· 2: 26