L17000009895

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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2021 OCT 19 AM 10: 31
SECRETARY OF STATE
FALLAHASSEEL FILE

COVER LETTER

TO: Registration Section Division of Corporations



CW FINANCIAL CONSULTING	i.LLC	
SUBJECT:(Name of I	Limited Liability Co	ompany)
The enclosed member, resignation or diss	sociation and fee	(s) are submitted for filing.
Please return all correspondence concerni	ing this matter to):
Thomas L. Ledbetter		
(Contact Person)	<u> </u>	
(Firm/Company)		
20125 Markward Crossing		
(Address)		
Estero, Florida 33928		
(City/State and Zip Code)	<u></u>	
For further information concerning this n	natter, please cal	1:
Thomas L. Ledbetter	610	.389-2801
	at (
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

Mailing Address:

\$25 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FILED

2021 OCT 19 AH 10: 30

SECRETARY OF STATE TALLAHASSEE, FET B

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)

CW I	limited liability company as it appears on the records of the Florida Departminancial Consulting, LLC	1en1
2. The Florida doc	ument/registration number assigned to this limited liability company is:	
	October 14, 2021	
3. The date this me Thomas L. Ledb	mber/manager withdrew/resigned or will withdraw/resign is:	_
4. I(Print ?	, hereby withdraw/resign as a, hereby withdraw/resign as a	
	(Print Title)	
of this limited lia resignation in wi	bility company and affirm the limited liability company has been notified of iting.	my
Thomas	2 S. Reelletto	
Signature of D	ssociating Member or Resigning Manager	
-	\$25.00 (Required)	
Centited Copy:	\$30.00 (Optional)	