

2170000 45171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

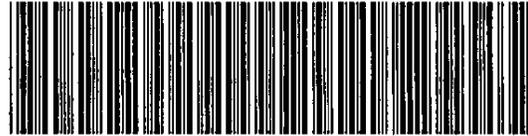
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

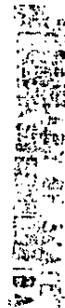
Special Instructions to Filing Officer:

Office Use Only



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04/30/18 - 01023 - 017 - 25.00



2018 APR 30 AM 10:15

FILED

MAY 02 2018
J. HARRIS



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 it appears on the records of the Florida Department of State is: KWIXATEC LLC

2. The Florida document/registration number assigned to this limited liability company is:
L17000045171

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4-16-18

4. I, Glenneth Palmer, hereby withdraw/resign as a
(Print Name of Person Resigning)

MANAGER
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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2018 APR 30 AM 13:09
STATE DEPARTMENT OF REVENUE