Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000242861 3)))



H210002428613ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

: (305)552-5973

Phone Fax Number

: (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Fmail	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONTARTESE HOLDINGS LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$25.00	

JUN 22 2021

A. LUNT



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:	CONTARTESE HOLDING	
	ument/registration number ass	signed to this limited liability company is:
4. I,(Print N	KISHOR RICO	gned or will withdraw/resign is: 06/15/2021
	(Print Title)	
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability company has been notified of my
Signature of Di	ssociating Member or Resign	ing Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	