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M. SOLOMON

## **COVER LETTER**

TO: Registration Section Division of Corporations				
JP-AW LLC SUBJECT:				
(Name of Lit	Company)			
The enclosed member, resignation or dissoc	ciation and fe	e(s) are submitted for filing.		
Please return all correspondence concerning	g this matter t	o:		
Paul Rafelson				
(Contact Person)		<u> </u>		
Rafelson Schick, PLLC (Firm/Company)				30 0202
2255 Glades Rd Suite 319				CT 13
(Address)			β	P
Boca Raton, FL 33431				1:26
(City/State and Zip Code)			4171	တ
For further information concerning this mat	iter, please ca	11:		
Paul Rafelson	833 at (	326-6529		
(Name of Contact Person)	_ \	ode & Daytime Telephone Number)		
Enclosed please find a check made payable  S25 Filing Fee		a Department of State for: ing Fee & Certified Copy		
Mailing Address: 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	

CR2E079 (2/14)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

2020 OCT 13 PM L

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM-FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY STREET

(Pursuant to 605.0216, Florida Statutes)

		appears on the records of the Florida Department
of State is:	W LLC	
2. The Florida doc:	ument/registration number assi	gned to this limited liability company is:
3. The date this mo	ember/manager withdrew/resig	ned or will withdraw/resign is:
4. I. Adam D. Werner (Print Name of Person Resigning)		, hereby withdraw/resign as a
CFO		
	(Print Title)	
of this limited lia resignation in wr	· ·	limited liability company has been notified of my
at Dute		
Signature of D	issociating Member or Resigni	ng Manager
	\$25.00 (Required)	
	\$30.00 (Optional)	