## 114000212449

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,
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2022 APR 12 PH 12: 11

## COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: C-Weed Tisternational Jocht Charler ) (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Cheril Feldway (Contact Person)
C-Wed Int / Cont Charles
LISSO UNITE COLON LCIN
Selian Reach FL 33445 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (A17)56.005  (Area Code & Daytime Telephone Number)
Englosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$\sum \text{S55 Filing Fee & Certified Copy}\$
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## 2022 APR 120PH 12: SECRETAR FOFST

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FLORIDA OR FOREIGN LIMITED LIABILITY COMPAN

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department
or State is C-West International Vacint Charters, LLC
2. The Florida document/registration number assigned to this limited liability company is:
L 19000212448
3. The date this member/manager withdrew/resigned or will withdraw/resign is March 1202 a
4. 1. CHARLES VACCARO, hereby withdraw/resign as a (Print Name of Person Resigning)
MEMBER (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Church weeke
Signature of Dissociating Member or Resigning Manager

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee: Certified Copy: