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(R	equestor's Name)
(A	ddress)
(A	ddress)
	City/State/Zip/Phone #)
(E	Business Entity Name)
([Ocument Number)
Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	
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FILED 2020 HAR 18 AH 9: 19 2020 HAR 18 AH 9: 19



APR 1) 1 2020

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Opulence Global LLC (Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Glenroy Bent Opulence Global LLC (Firm/Company) 606 Neuman Village Ct Oloce, FL 34761

For further information concerning this matter, please call:

(Name of Contact Person) at (32) 945-1679 (Area Code & Davtime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: ☑ \$25 Filing Fee & Certified Copy

<u>Mailing Address:</u> 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

CR2E079 (2/14)





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

OPULENCE Global LLC of State is:

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

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/5/2020

4. I. <u>Soel James</u>, hereby withdraw/resign as a (Print Name of Person Resigning)

Vice President.

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

Signature of Dissociating Member or Resigning Manager

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

CR2E079 (2/14)