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(Requestor's Name)				
(Address)				
(Address)				
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	ty/State/Zip/Phone #	<u> </u>		
(CI	ty/State/2/p/F/lone #	,		
PICK-UP	TIAW	MAIL		
(Bı	usiness Entity Name	)		
(Dr	ocument Number)			
(5)	,			
Certified Copies	Certificates o	f Status		
Special Instructions to	Filing Officer:			
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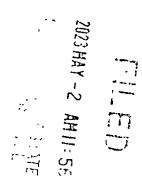
Office Use Only



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## 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)

	limited liability company a	s it appears on the records o	f the Florida Department
		assigned to this limited liabil	lity company is:
3. The date this me	mber/manager withdrew/re	signed or will withdraw/resi	gn is:
4. I, William F. Mitel	nell	, hereby withdraw/res	ign as a
Print \	fame of Person Resigning)	•	
Managing Memb	er		
	(Print Title)		
of this limited lia resignation in wr		he limited liability company	has been notified of my
aff	1 to		2023
Signature of Di	ssociating Member or Resi	gning Manager	HAY -
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		2 A
Certified Copy:	\$30.00 (Optional)		2023 HAY -2 AHII: 56

## **COVER LETTER**

_	stration Section		
Divi	sion of Corporations		
SUBJECT:	Amazing Impulse, LLC		
	(Name of	Limited Liability Co	mpany)
The enclose	d member, resignation or dis	sociation and fee(	s) are submitted for filing.
Please retur	n all correspondence concerr	ning this matter to:	
William Mitch	hell		
	(Contact Person)		_
Amazing Imp	ulse LLC		
	(Firm/Company)		_
4925 Scott Ro	d. Apt 418		
	(Address)		_
Fort Worth, T	X 76114		
	(City/State and Zip Code)		<del></del>
For further	information concerning this	matter, please call	:
William Mitc	hell	707 at (	953-0070
(1	Name of Contact Person)		e & Daytime Telephone Number)
Enclosed pl	ease find a check made paya	ble to the Florida	Department of State for:
<b>≡</b> \$25 Filir	ng Fee	□ \$55 Filin	g Fee & Certified Copy
31:1	ing Address:		Street Address:
	istration Section		Registration Section
Divi	ision of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
Tall	ahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)