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TO: Registration Section **Division of Corporations** Asset Yacht Management LLC SUBJECT: (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: Scott A. Padeni (Contact Person) Asset Yacht Management, LLC (Firm/Company) 1184 Stewart Drive (Address) Dunedin, Florida 34698 (City/State and Zip Code) For further information concerning this matter, please call: at (S18 859-4497 (Area Code & Daytime Telephone Number) Scott A. Padeni (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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)

	it appears on the records of the Florida E	Department
ment/registration number a	ssigned to this limited liability company is	s:
mber/manager withdrew/res	igned or will withdraw/resign is:	1, 2020
ideni	hereby withdraw/resign as a	
ame of Person Resigning)		
Print Title)		
	e limited liability company has been noti	fied of my
ssociating Member or Resig	ning Manager	
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	Yacht Management. LLC ment/registration number as mber/manager withdrew/res ideni ame of Person Resigning) (Print Title) pility company and afterm the	mber/manager withdrew/resigned or will withdraw/resign is: October October