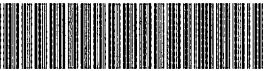
LZO 000 273749

(Requestor's Name)	
(Address)	9003
(Address)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	
(Business Entity Name)	10/26/2
(Document Number) Certified Copies Certificates of Status	
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COVER LETTER

TO: Registration Section Division of Corporations	
Asset Yacht Management, LLC SUBJECT:	
(Name of	Limited Liability Company)
The enclosed member, resignation or diss	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:
Ron Pasto	
(Contact Person)	
Asset Yacht Management, LLC	
(Firm/Company)	
1334 Tampa Road, #565	
(Address)	<u></u>
Palm Harbor, FL 34683	
(City/State and Zip Code)	
For further information concerning this n	natter, please call:
Ron Pasto	813 600-0600 at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payab	ole 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 Table Centre of Tallahassee
P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
randilassee, FL 52514	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)

	limited liability company as		ds of the Florida Department
2. The Florida doc L20000273749	ument/registration number a	ssigned to this limited li	ability company is:
3. The date this me	:mber/manager withdrew/res	signed or will withdraw/	resign is: 9/24/2020
Warms A William	ms 'ame of Person Resigning)		
	(Print Title)		
of this limited lia resignation in wr		ne limited liability comp	any has been notified of my
Signature of D	issociating Member or Resig	uning Manager	2020 OC
	\$25.00 (Required) \$30.00 (Optional)	· -	T 26 PH 3: 1