## L21000190863

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer.						

Office Use Only



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12/16/2023

## **COVER LETTER**

_	istration Section		
DIVI	sion of Corporations		
SUBJECT:	WEST AVENUE BOXING LL		
,,endici		Limited Liability Co	ompany)
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	:
SERGEY FEI	OOROV		
	(Contact Person)		
	(Firm/Company)		
37843 LOS A	RBOLES DR.		
	(Address)		<del></del>
FREMONT, O	CA 94536		
	(City/State and Zip Code)		_
For further	information concerning this r	natter, please call	:
SERGEY FEI	)OR()V	917 at (	8340537
(1	Name of Contact Person)		e & Daytime Telephone Number)
Enclosed pl	ease find a check made paya ng Fee		Department of State for: ng Fee & Certified Copy
Reg Divi P.O.	ing Address: istration Section sion of Corporations . Box 6327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee
Tall	ahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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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	as it appears on the record	s of the Florida Departmen	
of State is:			·	
2. The Florida doc L21000190863	ument/registration number	assigned to this limited lia	ability company is:	
	<del></del>	·	10/29/2023	
3. The date this me	mber/manager withdrew/re	esigned or will withdraw/r	esign is:	
4 I SERGEY FEDO	ROV	horaby withdraw/	haraby withdraw/ravion as a	
(Print A MGR (Manager)	Vame of Person Resignings	nerety windiaw	icingii do d	
	(Print Title)			
of this limited lia resignation in wr		the limited liability compa	any has been notified of my	
- erpel	f Fedor C Associating Member or Res	V		
Signature of D	ssociating Member or Res	igning Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			