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Resignation

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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)

	e limited liability company as it a	ppears on the records of the Florida Department
2. The Florida do L21000249249	cument/registration number assign	ned to this limited liability company is:
		 SIPTEMBER 16, 2021
3. The date this m JOSEPH JAMI		ed or will withdraw/resign is:
4. I,		_, hereby withdraw/resign as a
AMBR	Name of Person Resigning)	
	(Print Title)	
resignation in w	orising.	nited liability company has been notified of my
Signature of D	Dissociating Member or Resigning	g Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Ontional)	