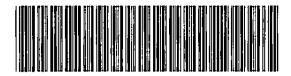
## L21000334846

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(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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Mm/Resign. 6/15/23

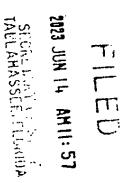
## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: /Sleco-Roman (Name of I	Scientific Supply LLC Limited Liability Company)
The enclosed member, resignation or diss	ociation and fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to:
Jordan Schnick (Contact Person)	
(Firm/Company)	
275 N Federal May (Address)	APT805
Pompano Beach FL (City/State and Zip Code)	33062
For further information concerning this n	
Joldan Soshnick (Name of Contact Person)	at (454) 270 0602 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payab  \$\sum \text{\$\sum \$\text{\$\text{\$1}}\$ Filing Fee}\$	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



## 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)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is:	oreco-Roman Scientific Supply LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L210	00334846
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 6/15/23
4. I, Joldan Print N	hereby withdraw/resign as a , hereby withdraw/resign as a
MGR	
of this limited liab	pility company and affirm the limited liability company has been notified of my ting.
	dux chrief
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)