L21000361624

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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06/20/23--01028--002 **25.00

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2023 JUN 20 AM 8: 27

COVER LETTER

_	istration Section ision of Corporations				
SUBJECT	1330 Holdings, LLC				
	(Name of Limited Liability Company)				
The enclose	ed member, resignation or dis	sociation and fee(s) are submitted for filing.		
Please retur	n all correspondence concern	ning this matter to:			
Ken Ehrlich					
	(Contact Person)		_		
Ehrlich & Na	parstek, PLLC				
	(Firm/Company)		_		
1330 SE Fede	eral Hwy				
	(Address)	· · · · · · · · · · · · · · · · · · ·	_		
Stuart, FL 349	994				
	(City/State and Zip Code)	·	_		
For further	information concerning this r	natter, please call:			
Ken Ehrlich		772 at (842-8822		
()	Name of Contact Person)		: & Daytime Telephone Number)		
Enclosed pl	lease find a check made payal	ble to the Florida I	Department of State for:		
■ \$25 Filii	ig Fee	☐ \$55 Filin	g Fee & Certified Copy		
	ing Address:		Street Address:		
-	istration Section ision of Corporations		Registration Section Division of Corporations		
	. Box 6327		The Centre of Tallahassee		
	ahassee, FL 32314		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)

of State is: 1330	Holdings, LLC		,		
2. The Florida doc L21000361624	ument/registration number a	essigned to this limited liab	pility company is:		
	ember/manager withdrew/re	signed or will withdraw/re	rsign is:		
4. I. Timothy Felice		, hereby withdraw/re	, hereby withdraw/resign as a		
Print 8	ame of Person Resigning)	·	•		
Manager/Member	•				
	(Print Title)				
of this limited lia resignation in wr	bility company and affirm the	he limited liability compar -	ny has been notified of my		
Signature of D	issociating Member or Resig	gning Manager			
_	\$25.00 (Required) \$30.00 (Optional)		PIL JUN 20		