L21000385328

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7/21/2023

NAME: STEALTH LLC

TYPE OF FILING: RESIGNATION

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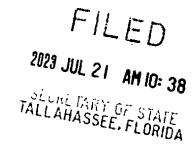
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COVER LETTER

то:		stration Section sion of Corporations		
SUBJ	IECT:	STEALTH LLC	Limited Liability Co	mpany)
The e	nclosed	d member, resignation or dis	sociation and fee(s	s) are submitted for filing.
Please	e return	all correspondence concern	ing this matter to:	
MARG	CHERT	EI.		
		(Contact Person)		_
STEA	LTH LL	С		
		(Firm/Company)		_
186 SI	EVEN F	ARMS DR SUITE F400		
		(Address)		_
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		(City/State and Zip Code)		_
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<u> </u>	(N	lame of Contact Person)	at ((Area Code) 2 & Daytime Telephone Number)
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	sed ple 5 Filin	ease find a check made payal g Fee		Department of State for: g Fee & Certified Copy
		ng Address: stration Section		Street Address: Registration Section
		sion of Corporations Box 6327		Division of Corporations The Centre of Tallahassee
	_	hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassec, 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 it appears on the records of the Florida Department
of State is:	ALTH LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L21000385328	
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
Tuan Elstrom	, hereby withdraw/resign as a
(Print N	, hereby withdraw/resign as a large of Person Resigning)
Member, Stealth	LLC
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Tuan	Elstron
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
-	\$30.00 (Optional)