

7/13/22, 11:20 AM

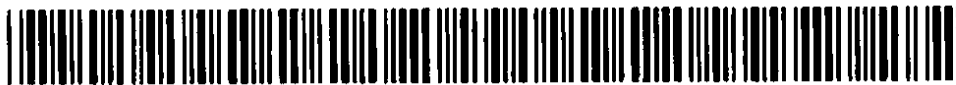
Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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Phone : (305)901-6041
Fax Number : (305)901-6042

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: sofiavottero22@gmail.com

LLC REGISTERED AGENT RESIGNATION
ALUSO LLC

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JUL 13 2022

K. Brumbley

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

MARIA STEVENAZZI, hereby resigns as
Name of Registered Agent

Registered Agent for AWSO LLC
Name of Limited Liability Company

421000397023
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

[Signature]
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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