N21000 AIII

(Rec	questor's Name)		
(Add	iress)		
(Add	iress)		
(City	//State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



400388936874

TALLAHARREPESTALE

06/13/22--01015--020 **25.00

AUG 3 0 2022 S. PRATHEI

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Gabrade Holding LLC (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Nichdas West (Contact Person)
Cabbade Itadings (Firm/Company)
7-208 Central Axc
31. Pate 15 by a FC 38707 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 401 · SOS4 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\overline{\subset}\$ \$\S25\$ Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, 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)

1. The name of the	limited liability company as it appears on the records of the Floric	la Depart	ment
of State is:	abbade Hollings LLC		·
2. The Florida docu	ument/registration number assigned to this limited liability compar	ny is:	
L2100	0411171	1 1-	
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:	17/2	2
4. I. (Print A	hereby withdraw/resign as a a a a a a a a a a a a a a a a a a	I	
-Mar	(Print Fite)		
of this limited lia resignation in wr	bility company and affirm the limited liability company has been riting.	notified o	f my 2022
	1/2/	<u>4-</u> 4-5 3-5 3-7	1 NOC 2302
Signature of Di	sociating Member or Resigning Manager	EE FLO	113 PM 6:40
Filing Fee:	\$25.00 (Required)	ONIO ONIO	5; E
Certified Copy:	\$30.00 (Optional)	ightharpoons	0