121000416201

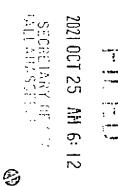
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
ORNE		
Special Instructions to Filing Officer: J. HORNE J. 2021		
,	MUN	
		10/10
<u> </u>		

Office Use Only



100375369591

10/25/21--01015--025 **50.00



COVER LETTER

TO: Registration Section Division of Corporations	*
951 Green Street LLC SUBJECT:	
(Name of Limited Liab	ility Company)
The enclosed member, resignation or dissociation ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning this ma	tter to:
Jeremy William S.	
(Contact Person)	
951 Green Street LLC	
(Firm/Company)	
184 Sunset Avenue	
(Address)	
Palm Beach, FL 33480	
(City/State and Zip Code)	
For further information concerning this matter, pleas	se call:
Jeremy William S. 312	2 880-8328
	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Fl	orida Department of State for:
■ \$25 Filing Fee □ \$5	5 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
1 attanassee, 1 L 32314	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)

	limited liability company as it	appears on the records of the Florida Department
		gned to this limited liability company is:
3. The date this me	ember/manager withdrew/resig	ned or will withdraw/resign is: Oct 15th
4. I. Vlad Strelsov of Strelter Holdings (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print N	lame of Person Resigning)	
Member		
	(Print Title)	
of this limited lia resignation in wr		limited liability company has been notified of my
Vlad Strilson		
Signature of D	issociating Member or Resigni	ng Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	