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PALL-MANSEE FLORIDA

DEC 2.2 2022 S. PRATH!

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Sould Limited Liability Company)		
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to:		
Claudia maestre		
Sal V LL C (Firm/Company)		
6445 Indian Creek Jr		
Miani Seach FL 3314/ (City/State and Zip Code)		
For further information concerning this matter, please call:		
Claudin MneStre at (786) 7.68 3493 (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: \$\sum_{1}\$ \$25 Filing Fee \$\sum_{2}\$ \$55 Filing Fee & Certified Copy		
Mailing Address: Street Address:		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 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 o	n the records of the Florida Department
of State is:	Soul V LLC	
2. The Florida docu	ument/registration number assigned to th	is limited liability company is:
122	00034139	
3. The date this me	mber/manager withdrew/resigned or will	withdraw/resign is: 9/1/22
	Fresh man, hereby	
Mrg	(Print Title)	
of this limited lial resignation in wr	bility company and affirm the limited lial	bility company has been notified of my
	AF	•
Signature of Di	ssociating Member or Resigning Manago	27
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	2022 SEP 28 PH 4:
		SEP 28
		ZB PH
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