L23000043539

(Requestor's Name)						
(Address)						
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ALLAHASSEE, FI DRIDA

COVER LETTER

TO: Registration Section

CR2E079 (2/14)

Divis	sion of Corporations		
SUBJECT:	Plush Management Agend	cy LLC	
30000011	(Name of I	Limited Liability Co	mpany)
The enclosed	l member, resignation or disse	ociation and fee(s) are submitted for filing.
Please return	all correspondence concernit	ng this matter to:	
Mikhail Kote	egov		
	(Contact Person)		_
Plush Mana	agement Agency LLC		
	(Firm/Company)	-	_
1238 NE 17	7th Ave, APT 1		
	(Address)		_
33304			
	(City/State and Zip Code)		_
For further in	nformation concerning this ma	atter, please call:	
Fedor Kote	gov	561 at (808-6165
(N:	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed plea ■ \$25 Filing	ase find a check made payable Fee		Department of State for: g Fee & Certified Copy
	OURIER ADDRESS:		MAILING ADDRESS:
Registration ! Division of C			Registration Section
Clifton Build	•		Division of Corporations P.O. Box 6327
	ve Center Circle		Tallahassee, Florida 32314
	Florida 32301		runanassee, rionga 32314



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 h Management Agency Ll		the Florida	Depa	rtment
2. The Florida docu L23000043539	ument/registration number as	ssigned to this limited liabil	ity company	y is:	
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resig	gn is:	5/2023	3
4. I, Louis Lanzillo	ign as a				
Member	ame of a comment				
	(Print Title)				
of this limited lia resignation in wr	bility company and affirm the	e limited liability company	has been no	otified	of my
Signature of Di	ssociating Member or Resig	ning Manager	구 구 (-	202	
	\$25.00 (Required) \$30.00 (Optional)		LAHASS	2023 OCT 16	T