L24000008633

(Requestor's Name)
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





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08/16/24--01020--019 **25.00

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COVER LETTER

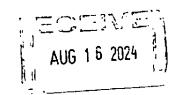
	_	stration Section		
	DIVIS	ion of Corporations		
SUBJE	CT:	Passion Posts LLC		
		(Name of Limite	ed Liability Cor	mpany)
The enc	closed	l member, resignation or dissocia	tion and fee(s) are submitted for filing.
Please r	return	all correspondence concerning the	nis matter to:	
Gary Rag	gusa			
		(Contact Person)		_
Passion I	Posts I.	LC		
		(Firm/Company)		_
3301 NE	Elst A	venue 908		
		(Address)		_
Miami, F	L 331	37		
	•	(City/State and Zip Code)		_
For furt	ther in	nformation concerning this matter	, please call:	
Gary Rag	gusa		917 at (837-0537
	(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
	-	ase find a check made payable to	the Florida I	Department of State for:
\$25	Filing	g Fee	□ \$55 Filin	g Fee & Certified Copy
		ng Address: stration Section		Street Address: Registration Section
	_	ion of Corporations		Division of Corporations
		Box 6327		The Centre of Tallahassee
	Tallal	hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



July 22, 2024

GARY RAGUSA 3301 NE 1ST AVENUE 908 MIAMI, FL 33137

SUBJECT: PASSION POSTS LLC Ref. Number: L24000008633



We have received your document for PASSION POSTS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

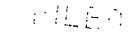
Neysa Culligan Regulatory Specialist III

Letter Number: 324A00016036

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



2024 AUG 16 AM 8: 23

TALLAHASSEE, FLORIDA

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	e limited liability company as it appears on the records of the Florida Department ion Posts LLC
	cument/registration number assigned to this limited liability company is:
4. I, Irina Zhikh (Print)	ember/manager withdrew/resigned or will withdraw/resign is:
AMBR ————	(Print Title)
of this limited li- resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Signature of D	vissociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)