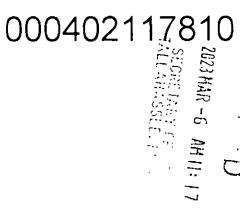
(R	equestor's Name)			
(Address)				
(Address)				
- (C	ity/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(B	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer.				
	J. HORNE MAR - 7 2023			

Office Use Only







CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 546542 7649595
AUTHORIZATION: Spelle Man
COST LIMIT : \$85.00
ORDER DATE: March 3, 2023
ORDER TIME: 9:54 AM
ORDER NO. : 546542-565
CUSTOMER NO: 7649595
RESIGNATION OF RA
NAME: SOLARA HOLDINGS - IWM, L.L.C.
XX RESIGNATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Evliena Baker-EXT#

EXAMINER'S INITIALS:

COVER LETTER

SUBJECT: Name of Limited Liabil	ity Company
DOCUMENT NUMBER: M15000002526	
The enclosed Resignation of Registered Agent for a Limifor filing.	ted Liability Company and fee are submitted
Please return all correspondence concerning this matter to	the following:
RESIGNATIONS DEPARTMENT	
Name of Person	
CORPORATION SERVICE COMPANY	
Name of Firm/Company	
251 LITTLE FALLS DRIVE	
Address	_
WILMINGTON, DE 19808	
City/State and Zip Code	_
ANNUALREPORTS@CSCGLOBAL.COM	
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please cal	1:
RESIGNATION DEPT \$00 at (927-9801
Name of Person Area Co	de Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.0115. Florida Statutes	s, the undersigned,	130 Z
CORPORATION SEE	RVICE COMPANY	, hereby resigns as	1000 1000 1000 1000 1000
Name of Registered Agent		, Hereby resigns as	
Registered Agent for	Solara Holdings - IWM, L.L.C.		10 d
	Name of Limited Liability Compa	iny	
M15000002526			~
Documen	t Number, if known		9
_	ation was mailed to the above listed limite		
The agency is termin	ated and the office discontinued on the 31: Cylina By Assistant Vice President Signature of Resign	her	statement is filed.
If signing on behalf o	of an entity:		
	BY EYLIENA BAKER		
	Typed or Printed Name VICE PRESIDENT	2	
	Capacity		

\$85.00 Active limited liability company
\$25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314