

M190000000622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

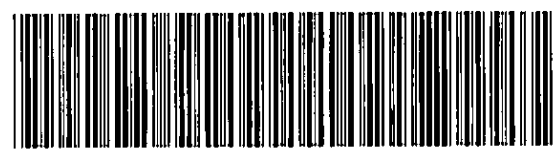
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG 10 AM 9:18

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TALLAH SSEE. 91

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 08/10/2021

Name: Marcel Ogbonna-Amu

Reference #: 1449701

Entity Name: FWM HOLDINGS LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY OF THE FILING

FILE
FIRST

ANY ISSUES, CALL
MARCEL:

(518) 213 - 0826

Thank you!

Authorized Amount: \$55.00

Signature: Marcel Ogbonna-Amu



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
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**FILE
FIRST**

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Thank you!

Authorized Amount: \$55.00

Signature: Marcel Ogbonna-Amu

COVER LETTER

TO: Registration Section
Division of Corporations

FWM HOLDINGS LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emily Indig

(Name of Person)

Seward & Kissel LLP

(Firm/Company)

One Battery Park Plaza

(Address)

New York, NY 10004

(City/State and Zip Code)

For further information concerning this matter, please call:

Emily Indig

212

574-1680

at ()

(Name of Person)

(Area Code & Daytime Telephone Number)

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☒ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

FWM HOLDINGS LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

10/28/2019

(Date registered with Florida Department of State)

M19000010622

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Kathleen Keating, General Counsel and Chief Compliance Officer

(Typed or printed name of signee)

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SECRETARY OF STATE
TALLAHASSEE, FL

Filing Fee: \$25.00