M21000012326

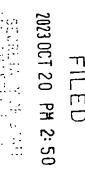
(Requestor's Name)					
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Rm 10/20/23

COVER LETTER

	egistration Section ivision of Corporations				
D	ivision of Corporations				
SUBJEC	Victory Polymers Corp.			_	
	(Name of)	Limited Liability Cor	mpany)	-	
The enclo	sed member, resignation or diss	sociation and fee(s	s) are submitted for filing.		
Please ret	urn all correspondence concerni	ing this matter to:			
Jamie Prude	den				
	(Contact Person)			202	
				3 00	FILED
	(I)		_ _	72	=
	(Firm/Company)		····(0	Ш
752 E 5th S	it.,		••	35	\Box
	(Address)	-	_ :	2: 50	
Boston, MA	A. 02127			0	
	(City/State and Zip Code)		ana		
For furthe	er information concerning this m	natter, please call:			
Kathy Murp	phy	617 at (479-5000		
	(Name of Contact Person)		& Daytime Telephone Number)	-	
Enclosed ☐ \$25 Fi	please find a check made payab ling Fee		Department of State for: g Fee & Certified Copy		
Re Di P.e	ailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

2023 OCT 20 PM 2: 50

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

(Pursuant to 605.0216, Florida Statutes)

		y as it appears on the records of the Florida Department
2. The Florida doc M21000012326	ument/registration numbe	er assigned to this limited liability company is:
3. The date this mo	ember/manager withdrew/	resigned or will withdraw/resign is: 8/4/2023
4. I, Jamie Prudden (Print Name of Person Resigning)		, hereby withdraw/resign as a
	'ame of Person Resigning)	
AP		
	(Print Title)	_
of this limited lia resignation in wr		n the limited liability company has been notified of my
Signature of D	issociating Member or Re	esigning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:		

