119 000294597

(Requestor's Name) 533 Turnbarry Lane (Address) (Address) (Address) City/State/Zip/Phone #)	900390559849
PICK-UP WAIT MAIL (Business Entity Name)	97 557220 089 € 012 - +*135 .55
(Document Number)	
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OCT 17 2022

D CUSHING



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)

L 19000294597		s limited liability company is:
	<u> </u>	
3. The date this	member/manager withdrew/resigned or will	withdraw/resign is: June 1, 2022
(Prin	AEZ , hereby , hereby , hereby , hereby	~
AMBR		T: .
	(Print Title)	<u>, -</u>
a Cabia limitad	liability company and affirm the limited lial	bility company has been notified.
resignation in		
	. 0	:
/ Nan.	10/5	
Signature	Dissociating Member or Resigning Manage	er , ;
Signature of		
	Chicago Paraninado	
	\$25.00 Required)	
Filing Fee: Certified Copy:	\$30.00 (Optional)	