L19000300096

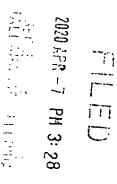
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Resignation

APR 2 1 2020 I ALBRITTON

COVER LETTER

TO: Regis	stration Section		
Divis	sion of Corporations		
SUBJECT:	Gentle Souls LLC		
	(Name of	Limited Liability C	ompany)
The enclosed	d member, resignation or dis-	sociation and fee	(s) are submitted for filing.
Please return	all correspondence concern	ing this matter to	o:
Demetria R. Se	cott		
	(Contact Person)	· # ±	
Gentle Souls L	LC		
	(Firm/Company)		·····
10984 SW 53r	d Circle		
	(Address)		_
Ocala, FL 344	76		
	(City/State and Zip Code)	·· ,,	
For further in	nformation concerning this n	natter, please cal	1:
Demetria R. So	cott	352 at (286-4519
(N	Jame of Contact Person)		le & Daytime Telephone Number)
Enclosed ple	ease find a check made payat	ole to the Florida	Department of State for:
■ \$25 Filin	• •		ng Fee & Certified Copy
Maili	ng Address:		Street Address:
Regis	stration Section		Registration Section
	sion of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
rana	hassee, FL 32314		2415 N. Monroe Street, Suite 810



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)

	limited liability company as it appears on the records of the Florida Department e Souls LLC
2. The Florida doc L19000300096	ument/registration number assigned to this limited liability company is:
Noveyana Jacks	ember/manager withdrew/resigned or will withdraw/resign is: <u>04-02-2020</u> on, hereby withdraw/resign as a large of Person Resigning)
Manager	
	(Print Title)
resignation in wi	bility company and affirm the limited liability company has been notified of my iting. issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)