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## **COVER LETTER**

TO: Registration Section Division of Corporations	
Gentle Souls LLC SUBJECT:	
	imited Liability Company)
The enclosed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please return all correspondence concernin	g this matter to:
Demetria R. Scott	
(Contact Person)	
Gentle Souls LLC	
(Firm/Company)	
10984 SW 53rd Circle	
(Address)	
Ocala, Fl. 34476	
(City/State and Zip Code)	<del></del>
For further information concerning this ma	itter, please call:
Demetria R. Scott	352 286-4519 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable	e to the Florida Department of State for:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

CR2E079 (2/14)



## 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)

	mited liability company as it appears on the records of the Florida Department Souls LLC
	nent/registration number assigned to this limited liability company is:
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is:
4. I. Navongela Frazier	, hereby withdraw/resign as a ne of Person Resigning)
Manager	
- iP	rint Title)
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of my ng.
Signature of Diss	sociating Member or Resigning Manager
Filing Fee: Certified Copy:	•