## L22000205690

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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08/22/23--01019--023 \*\*25.00





## **COVER LETTER**

TO: Registration Section Division of Corporations	•
Zazzzy, LLC SUBJECT:	
(Name o	f Limited Liability Company)
The enclosed member, resignation or dis	ssociation and fee(s) are submitted for filing.
Please return all correspondence concer-	ning this matter to:
Sheri R. Clinard	
(Contact Person)	
Zazzzy, LLC	
(Firm/Company)	
3332 10th LN W	
(Address)	
Palmetto, FL 34221	
(City/State and Zip Code)	<del></del>
For further information concerning this	matter, please call:
Sheri R. Clinard	941 462-7748 at ( )
(Name of Contact Person)	at ()(Area Code & Daytime Telephone Number)
Enclosed please find a check made paya \$25 Filing Fee	able to the Florida Department of State for:  ☐ \$55 Filing Fee & Certified Copy
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

CR2E079 (2/14)



2023 AUG 22 AM 9: 22

## 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)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is: Zazzz	ey, LLC
2. The Florida doct L22000205690	ument/registration number assigned to this limited liability company is:
Thomasa Eighau	ember/manager withdrew/resigned or will withdraw/resign is: Aug. 1, 2023
4. I,	, hereby withdraw/resign as a
Owner	ume of Person Resigning)
	·
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
VALLE	an History
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	