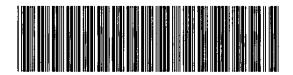
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COVER LETTER

TO: Registration Section Division of Corporations

Surfect. Bacio Bacio Bridal Salons, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Pat DiSalvo, CPA

(Contact Person)

DiSalvo & Associates, P.A.

(Firm/Company)

1760 N. Jog Road, Suite 150

(Address)

West Palm Beach, FL 33411

(City/State and Zip Code)

For further information concerning this matter, please call:

Patrick DiSalvo, CPA at (561

(Name of Contact Person)

561 ₎ 659-11//

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

\$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (12/13)



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

	mited liability company as it o Bacio Bridal Salons, L		of the Florid	la Dep	artment		
2. The Florida docum L0500001903	nent/registration number of th	is limited liability con	npany is:	PALLAMASSE O	2014 JAN 21		
3. The date this member withdrew or will withdraw is: Was entered in-error/Never A Manager							
4. I, Lenyce Evan	s-Boyd	, hereby resign as a	Manager	.ਜੂਜਾ -	28		
(Print Name of Person Resigning)			(Print Title)				
resignation in writi	lity company and affirm the ling. Solution of Dissociating Management of Dissociating Management of the line of t		ny has been r	notified	l of my		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)						