## L05000101361

(Re	questor's Name)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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ECRETARY OF STATE

T. HAMPTON

JUN 2 5 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: L'ESPRIT DAY SPA, LLC	
(Name of Limited Liabi	lity Company)
The enclosed member, managing member or manage filing.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this mat	ter to:
JESSICA EMARD	
(Contact Person)	
L'ESPRIT DAY SPA, LLC	·
(Firm/Company)	
10100 INTERNATIONAL DRIVE	
(Address)	
ORLANDO, FL 32821	
(City/State and Zip Code)	
For further information concerning this matter, pleas	e call:
JESSICA EMARD at (_4	07 355-0505
(Name of Contact Person) (Are	a Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo	orida Department of State for: \$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



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as	- ·	of the Florida Department
	lity company was organized		
	ment/registration number of	- ,	npany is:
			MAINAGER/MENDER
resignation in wri	-		ny nas been notined of my
Signature of Resignature	gning Member, Managing M	/09/03 lember or Manager	
	\$25.00 (Required) \$30.00 (Optional)		F.I 08 JUN SECRETA TALLAHAS

CR2E079 (5/06)

DIN 24 PH 1: 4