## 

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
<i>)</i>	our runner,			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		•		

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D. BRUCE

JUL 0 2 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section	
Division of Corporations	
	· · · · · · · · · · · · · · · · · · ·
SUBJECT: Cup o Soul, LLC	Ç
(Name of Limited Lia	bility Company)
The enclosed member, managing member or managiling.	ger resignation and fee(s) are submitted for
Please return all correspondence concerning this ma	atter to:
Dawn Henderson	
(Contact Person)	
Dawcher's Salon and Day Spa	
(Firm/Company)	<del></del>
711-A Orange Avenue	
(Address)	
Winter Park, FL 32789	
(City/State and Zip Code)	
For further information concerning this matter, plea	
Debbie Bowlus at (	407 <u>645-4000</u>
	rea Code & Daytime Telephone Number
Enclosed please find a check made payable to the F  \$\sumset \frac{1}{2}\$\$\$ \$\frac{1}{2}\$\$ Filing Fee	
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)



## 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 o o Soul, LLC	it appears on the record	s of the Florida Department
2. This limited liab Florida	ility company was organized	d under the laws of:	
3. The Florida docu	ment/registration number o	f this limited liability cor	npany is:
4. I, Dawn Hen	derson ame of Person Resigning)	, hereby resign as a	Managing Member
	oility company and affirm th	e limited liability compa	,
Filing Fee:	gning Member, Managing N \$25.00 (Required)	1ember or Manager	10 JUL 01
Certified Copy:	\$30.00 (Optional)		

CR2E079 (5/06)