## L0600057364

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(Address)				
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(City/State/Zip/Phone #)				
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EXAMINER

## COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: My Pets Dream Boutique,	LLC
(Name of Limited Lia	
The enclosed member, managing member or managiling.	ger resignation and fee(s) are submitted for
Please return all correspondence concerning this m	atter to:
Anthone R. Damianakis	
(Contact Person)	<del></del>
Peacock Gaffney & Damianakis	
(Firm/Company)	<del></del>
2348 Sunset Point Rd.	
(Address)	
Clearwater, FL 33765	
(City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
Anthone R. Damianakis	727 , 796–7774
	rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the F	<del> </del>
x \$25 Filing Fee	\$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	rananassee, Pionida 32314



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



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

1. The name of the lir	nited liability company as it a	ppears on the records	of the Florida Department
of State is: My_	Pets Dream Boutique, L	LC	
	,		
2. This limited liabilit	ty company was organized un	der the laws of:	
Florida			
3. The Florida docum L06000057364	ent/registration number of the	is limited liability com	npany is:
4 1 Crystal Hu	nt	_, hereby resign as a	Managing Member
'' *',	ne of Person Resigning)	, norcely realign as a	(Print Title)
resignation in writing	ity company and affirm the ling.  July 2015  Amount of the line of	1	ny has been notified of my
Filing Fee:	\$25.00 (Required)	·	
Certified Copy:	\$30.00 (Optional)		