

L070000006649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

FEB 27 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XOLUXION BIOCOSMETICS LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

ELVIS D SALVADOR
(Contact Person)

(Firm/Company)

10901 NW 83 STREET # 205
(Address)

DORAL, FL 33178
(City/State and Zip Code)

For further information concerning this matter, please call:

ELVIS SALVADOR at (305) 205-8776
(Name of Contact Person) (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

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TALLAHASSEE, FLORIDA



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 limited liability company as it appears on the records of the Florida Department of State is: XOLOUXION BIOCOSMETICS LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
107000006649

4. I, MERCEDES RODRIGUEZ, hereby resign as a MEMBER
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

 Jan-23-2012

Signature of Resigning Member, Managing Member or Manager

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TALLAHASSEE, FLORIDA