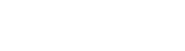
L0700009452

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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SECRETAGE FOR THE

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Twirl 3, LLC	
(Name of Limited	d Liability Company)
The section of the se	16-()
The enclosed member, managing member or m filing.	lanager resignation and fee(s) are submitted for
Please return all correspondence concerning the	is matter to:
Richard J. O'Hare	
(Contact Person)	
Richard J. O'Hare P.A.	
(Firm/Company)	
1550 Madruga Ave., #120	
(Address)	
0 10 11	
Coral Gables, FL 33146	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Ç .	
Richard J. O'Hare	, 305 661-4600 Ext. 205
(Name of Contact Person)	t (305) 661-4600 Ext. 205 (Area Code & Daytime Telephone Number)
England along find a shade wards wearble to	h - Florido Donostoros de Contro Sono
Enclosed please find a check made payable to t \$25 Filing Fee	\$55 Filing Fee &
4 425 1 mig 100	Certified Copy
	••
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)



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SECRLIAN: UI STATE
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 of State is: Twirl 3,		ppears on the records	of the Florida Department
2. This limited liability confida	ompany was organized und	er the laws of:	
3. The Florida document/ <u>L0700009452</u>	registration number of this	limited liability con	npany is:
4. I, Fabio Ciraulo (Print Name of I	Person Resigning)	, hereby resign as a	Member & Manager (Print Title)
of this limited liability c resignation in writing.			ny has been notified of my
-	5.00 (Required) 0.00 (Optional)		