L09000045823

(0.		
(₭€	equestor's Name)	
(Ac	ldress)	
	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	cument Number)	· · ·
	·	
Certified Copies	· Certificates	s of Status
,	-	
Special Instructions to	Filing Officer:	

Office Use Only



000160874210

09/28/09--01038--013 **25.00



SEP 2 9 2009 EXAMINER

COVER LETTER

TO:	-	stration Section		
	Divis	ion of Corporations		
SUBJ	ECT:	Koowear LLC		
		(Na	me of Limited Liability Co	ompany)
The e		l member, managing me	ember or manager resi	ignation and fee(s) are submitted for
Please	e return	all correspondence cor	ncerning this matter to	:
Cha	rles (Cooper		
-2		(Contact Person)		income.
Koo	wear,	LLC		
	· · · · · · · · · · · · · · · · · · ·	(Firm/Company)		
Po E	3ox 2	029		
:	· · · · · · · · · · · · · · · · · · ·	(Address)		_
Aub	urnda	ale, Fl. 33823		
		(City/State and Zip Co	ode)	_
For fu	ırther iı	nformation concerning t	his matter, please call	:
Cha	rles (Cooper	at (863	, 967-3970
,	(N	ame of Contact Person)		e & Daytime Telephone Number)
Enclo	sed ple	ase find a check made r	payable to the Florida	Department of State for:
	F	\$25 Filing Fee		\$55 Filing Fee &
				Certified Copy
STRE	EET/C	OURIER ADDRESS:		MAILING ADDRESS:
_		Section		Registration Section
		Corporations		Division of Corporations
	n Build			P.O. Box 6327
		ive Center Circle		Tallahassee, Florida 32314
Tallal	nassee,	Florida 32301	•	

CR2E079 (5/06)



FILED

2009 SEP 28 PM 3: 23

SECRETARY OF 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 l of State is: Koo		pany as it ap	pears on the	e records of	the Florida [Department
2. This limited liabil	ity company was or ited Liability Co	_	er the laws	of:		
3. The Florida document L09000045	_	mber of this	limited liab	oility compar	ny is:	
of this limited liab resignation in write	me of Person Resigning ility company and a	ffirm the lim	ited liability	y company h	,	•
Filing Fee: Certified Copy:	\$25.00 (Required \$30.00 (Optional)	•	red ne on		DEJUAN Notary Public - 5 My Comm. Expir Commission d	State of Florida es Feb 8, 2013

9-18-2009

CR2E079 (5/06)