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**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJI		ind Linkilian Co.		
	(Name of Lin	nited Liability Con	mpany)	
The enfiling.	closed member, managing member or	r manager resig	gnation and fee(s) are subn	nitted for
Please	return all correspondence concerning	this matter to:		
Bren	da Paauwe-Navori			
	(Contact Person)			1,0 13
Style	in the Aisle, LLC	<u> </u>	_	MIZFEB 29 PHIZ: 59 SECRETARY OF STATE SECRETARY OF STATE
	(Firm/Company)		·	ASS. 29
7402	Earldom Drive		rad with a	P. P. C.
	(Address)		. ,	SE 2:5
Playa	a del Rey, CA90293		_	DM 9
	(City/State and Zip Code)			
For fur	ther information concerning this matt	er, please call:		
Bren	da Paauwe-Navori	at ( 941	320-4311	
	(Name of Contact Person)	(Area Code	& Daytime Telephone Num	ber)
Enclos	ed please find a check made payable to \$25 Filing Fee		Department of State for: \$55 Filing Fee & Certified Copy	
Registr Division Clifton 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations a Building Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 3231	

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 le in the Aisle, LLC	it appears on the records of th	e Florida Department		
2. This limited liab Florida	ility company was organized	under the laws of:			
3. The Florida docu L09000062	_	this limited liability company	is:		
4. I, Renee Lathrop  (Print Name of Person Resigning)  of this limited liability company and affirm the lim resignation in writing.			_, hereby resign as a Managing Member (Print Title) mited liability company has been notified of my		
Than	gning Member, Mahaging M \$25.00 (Required) \$30.00 (Optional)	2-25-12 Tember or Manager	2012 FEB 29 . PM 12: SECRETARY OF STI TALLAHASSEE, FLO		