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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Healthy You Weight Los	ss, LLC ed Liability Company)
`	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning the	nis matter to:
Mary E Havens	
(Contact Person)	
Healthy You Weight Loss	
(Firm/Company)	
1803 NE Jensen Beach Blvd	
(Address)	
Jensen Beach, FL 34957	
(City/State and Zip Code)	·
For further information concerning this matter	, please call:
Mary E Havens	at (772) 285-4987
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$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

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 althy You Weight Los	it appears on the records of the s, LLC	ne Florida Department
2. This limited liab	ility company was organized	l under the laws of:	
3. The Florida doci	_	f this limited liability company	y is:
_{4. I,} Joey B Chang		, hereby resign as a MGR	
(Print N	ame of Person Resigning)	·	(Print Title)
of this limited lia resignation in wr		e limited liability company ha	s been notified of my
	China		
Signature of Resi	gning Member, Managing N	1ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		