## L11000111465

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
		<b>:</b>	
		<u>-</u> .	

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations		**	
SUBJECT: COTTON SHOPS LLC			
	imited Liability Company)		
The enclosed member, resignation or disso	ciation and fee(s) are submitted for filing.		
Please return all correspondence concernin	g this matter to:		
CELEMMA C. LARA ESPINOZA			
(Contact Person)			
COTTON SHOPS LLC			
(Firm/Company)		•	
. 7950 NW 53RD STREET, SUITE 215	entermone of the second second	ين هد . به د د د د د د د د د د د د د د د د د د	
(Address)	and processing to the same and a second seco	<ul> <li>a president programa production and production of the programme and progr</li></ul>	
MIAMI, FL 33166	responding to the same of the second	<ul> <li>nap. 31. pr p. m. e. m. dyndynder "Almer" der pulpten</li> </ul>	
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(City/State and Zip Code)	مساو بالمانية المانية	, and the second second second second	
For further information concerning this ma	tter, please call:	and the second s	
Andres hurtado	305 ***** 423-8932	. a. d. ng-ng-na-an-an-an-an-an-an-an-an-an-an-an-an-	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable \$25 Filing Fee	to the Florida Department of State for:  \$\square\$ \$\square\$ \$\square\$ \$\square\$ Filing Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations		Division of Corporations	
Clifton Building	P.O. Box 6327		

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

The name of the limited liability company as it appears on the records of of State is:  COTTON SHOPS LLC	the Florida Department
2. The Florida document/registration number assigned to this limited liabilit	y company is:
L11000111465	and the second s
3. The date this member/manager withdrew/resigned or will withdraw/resigned	n is:
4. I,, hereby withdraw/resig	maca ·
(Print Name of Person Resigning)	
MGRM	
(Print Title)	ombigath deltatus (v. 1910) as the experimental malesta me
of this limited liability company and affirm the limited liability company has resignation in writing.  Signature of Dissociating Member or Resigning Manager	as been notified of my
Filing Fee: \$25.00 (Peguirad)	

Certified Copy:

\$30.00 (Optional)