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(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:					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)				
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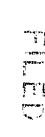




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SECRETARY OF STATE



T. CLINE FEB 1 5 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: 2 Dogs Studio, LLC	wied Link Ries Commons)
(Name of Lin	nited Liability Company)
The enclosed member, managing member o filing.	r manager resignation and fee(s) are submitted for
Please return all correspondence concerning	g this matter to:
Molly K. Yanni	
(Contact Person)	
2 Dogs Studio, LLC	
(Firm/Company)	75. 201 75. 201
2207 Community Way	2012 FEB 14 SECRETAR) ALLAHASS
(Address)	m~
Sanford, FL 32771	OF STA
(City/State and Zip Code)	RA CONTRACTOR CONTRACT
For further information concerning this matt	
Molly K. Yanni	_{at (} 321 ₎ 229-0881
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



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 ogs Studio, LLC	it appears on the records	of the Fl	orida D	epartr	nent
2. This limited liab State of Flo	ility company was organized orida	under the laws of:		₩ cc	2	
3. The Florida docs L1100012	ument/registration number of 1098	this limited liability com	npany is:	ECRETARY O	2012 FEB 14	
4. I, Joseph C.	Yanni Jame of Person Resigning)	, hereby resign as a	Manag	jing N	iemt ∕iemt	oer
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability compar	iy has be	en notif	ied of	my
Signature of Resi	gning Member, Managing M	ember or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					