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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: IZZEY DESIGN and Event Hangament (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Eurly Dorsche (Contact Person)
IZZEY DESIGNONDI EVENTH MONOGEMENT
5110 Pante Exeroid Lone (Address)
BOOROTO FL 33+80 (City/State and Zip Code)
For further information concerning this matter, please call: $ \frac{\omega}{\omega} = \frac{\omega}{\omega} $
EHILY DOSCHE at (Stel.) 75te-9045 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sum_{\color=0}^{\cupsup \color=0}^{\cupsup \color=0} \frac{\cappa \color=0}{\cup \color=0} \frac{\cup \cup \color=0}{\cup \color=0} \frac{\cup \color=0}{\cup \color=0} \frac{\cup \cup \color=0}{\cup \cup \color=0} \frac{\cup \cup \cup \cup \color=0}{\cup \cup \cup \cup \cup \cup \cup \cup

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

Certified Copy

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		
	oility company was organized		
FLORIC	DA		
3. The Florida doc	ument/registration number of OOOB334	this limited liability compar	ny is:
4. I, <u>JOSE</u> (Print N	H DOPSETTE Jame of Person Resigning)	, hereby resign as a	16R (Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability company h	as been notified of my
Signature of Page	ioning Mambar Managing M		
Signature of Kes	igning Member, Managing M	ember or Manager	2018 SEA
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		AHAS AHAS