-L120000/7289

(Re	equestor's Name)	
(Ad	ldress)	
· (Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
_		_
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer A	8 n n n
Special Instructions to	A	. LUNT
	MA	AR - 2 2011
		,
	EXA	AMINER

Office Use Only



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SECRETARY OF STATE FALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Candles & More of Central Florida (Name of Limited Liability Cor	to the same of the
·	
The enclosed member, managing member or manager resig filing.	ination and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Lisa Bradford	
(Contact Person)	_
Candles & More of Central Florida, LLC	_
(Firm/Company)	7A. 2
1200 Integra Landings, Apt 309	2012 HAR SECRETA
(Address)	HASS
Orange City, Florida 32763	SEE, OF
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Lisa Bradford at 386	215-9410
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I \$25 \text{ Filing Fee}\$	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 3230177	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
(DATATA (FIA))	e e e e e e e e e e e e e e e e e e e



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 it ap		orida Depar	tment ·
2. This limited liability company was organized und The State of Florida		er the laws of:	SEORE II TALLAHA	2017 KAR
3. The Florida docu L12000017			FR STA	
4. I, Edgardo R	lomero	, hereby resign as a Manag	ger ^{BA}	3 5
	ame of Person Resigning)	(P	rint Title)	
of this limited lial resignation in wri	pility company and affirm the lim	ited liability company has be	en notified o	of my
Signature of Resi	gning Member, Managing Memb	er or Manager		
. Signature of Resi	gining intollion, managing monto	or or managor		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			