

L12000044755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

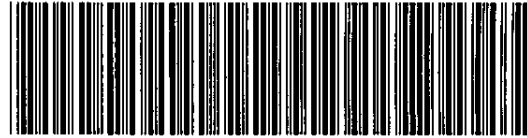
(Business Entity Name)

(Document Number)

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T. CARTER

LLC m/mGR Design

FROM THE DESK OF
ROSA MARIA BERMUDEZ.
11320 S.W. 42nd Terrace
Miami, Florida 33165

Phone: (786) 333-4062

October 27, 2014

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: Reina's Beauty Salon, LLC
Doc. No. L12000044755
Dissociation and Resignation of Member/Manager

Dear Sir or Madam:

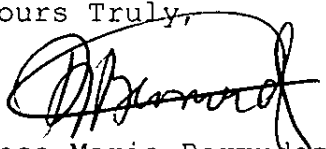
Enclosed herein is the Dissociation and Resignation of Rosa M. Muniz, as Member/Manager of the referenced limited liability company, together with check for the associated fees.

Please return all correspondence concerning this matter to:

Rosa Maria Bermudez
11320 SW 42 Terrace
Miami, Florida 33165

For further information concerning this matter, you may call
(786) 333-4062.

Yours Truly,


Rosa Maria Bermudez
RMB/bms

cc: File


**DISSOCIATION/RESIGNATION OF MEMBER/MANAGER
FROM FLORIDA LIMITED LIABILITY COMPANY
REINA'S BEAUTY SALON, LLC**

1. The Name of the limited liability company as it appears on the records of the Florida Department of State is **REINA'S BEAUTY SALON, LLC**.
2. The Florida document/registration number assigned to this limited liability company is L12000044755.
3. The Date this member/manager withdrew/resigned is October 27, 2014.
4. I, **ROSA MARIA MUNIZ**, hereby withdraw/resign effective immediately on this date October 27, 2014, as a member and manager of **REINA'S BEAUTY SALON, LLC**, A Florida Limited Liability Company. I affirm that the limited liability company was notified of my withdrawal/resignation in writing.

IN WITNESS WHEREOF, I hereunto set my hand on this date, October 27, 2014.



ROSA MARIA MUNIZ


Witness ANNE BARRON


Witness Raymon Altemon

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged and subscribed before me on October 28th, 2014, by ROSA MARIA MUNIZ, Principal, who personally appeared before me, is personally known to me or presented a Florida driver's license as identification and did take an oath.

Witness my hand and official seal.



NOTARY PUBLIC



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