## L12000051890

| (Re                                     | questor's Name)   |           |
|---|-------------------|-----------|
| (Ad                                     | dress)            |           |
| (Ad                                     | dress)            |           |
| (Cit                                    | y/State/Zip/Phone | e #)      |
| PICK-UP                                 | ☐ WAIT            | MAIL      |
| (Bu                                     | siness Entity Nan | ne)       |
| (Do                                     | cument Number)    |           |
| Certified Copies                        | _ Certificates    | of Status |
| Special Instructions to Filing Officer: |                   |           |
|   |                   |           |
|   |                   |           |
|   |                   |           |

Office Use Only



300244517983

02/14/13--01015--020 \*\*25.00

FILED
2013 FEB 14 PM 1: 18

FEB 1 5 2013 J. BRYMN

## **COVER LETTER**

| TO:                           | Registration Section Division of Corporations  |  |   |
|-------------------------------|--|--|---|
|                               | S.V.Bion of Corporations   |  |   |
| SUBJ                          | ECT: <u>Ko</u> &   | LO Tea Time  |   |
|                               | (Nar   | ame of Limited Liability Company)  | <del>.</del>  |
| The enfiling.                 | nclosed member, managing me  | ember or manager resignation and fee(s) are sub  | omitted for   |
| Please                        | return all correspondence con-   | ncerning this matter to:   |   |
|                               | Mildrey Gonza  | alez   | 7013<br>SF  |
|                               | (Contact Person)   |  | T T   |
|                               | (Firm/Company)   |  | FEB IT PR   |
| <u></u>                       | 6725 SW 137  | 7 ct, apt D  | TILLU<br>2013 FEB 14 PM 1: 18<br>SECRETARY OF STATE |
|                               | Miami FL 2<br>(City/State and Zip Coo  | 33/83<br>ode)  |   |
| For fu                        | rther information concerning th  | this matter, please call:  |   |
|                               | Mildrey Gonzalez<br>(Name of Contact Person)   | at ( <u>305</u> ) <u>873 - 335</u><br>(Area Code & Daytime Telephone Nu                                    | 7 <i>4</i><br><sub>umber)</sub>                     |
| Enclos                        | sed please find a check made parties \$25 Filing Fee                                   | payable to the Florida Department of State for:  \$\square\$ \$\\$55 \text{ Filing Fee & Certified Copy}\$ |   |
| Regist<br>Division<br>Clifton | ET/COURIER ADDRESS: ration Section on of Corporations Building Executive Center Circle | MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 32         | ns  |
| ∠001 t                        | executive Center Circle  | Tallahassee, Florida 32  | J14   |

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             |                                | f the Florida Departm   | ent  |
|-----------------------|--|--------------------------------|---|------|
| of State is:          | XOXO Tea                                 | Time                           | . 2   |      |
| 2. This limited liab  | pility company was organized             |                                | 2013 FEB 14 PH 1: 18 SECKETA AY OF STATE ALLAHASSEE, FLORIO any is: | TITU |
|                       | ument/registration number o              | f this limited liability compa | any is:   |      |
| 4. I, Mildre (Print N | ey Gonzalez<br>Name of Person Resigning) | , hereby resign as a           | Manager<br>(Prini tille)  | _    |
|                       | bility company and affirm th             |                                |   |      |
| Signature of Res      | igning Member, Managing N                | Member or Manager              |   |      |
| _                     | \$25.00 (Required)<br>\$30.00 (Optional) |                                |   |      |
| common copy.          | Ψ20.00 (Optional)                        |                                |   |      |