L13000014281

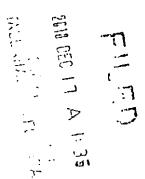
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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12/17/18--01029--015 **55.00



D. SCOTT JAN 4 2019

COVER LETTER

TO: Registration Section Division of Corporations			
Division of Corporations			
SUBJECT: PUT YOUR NAME ON ANY			
(Name of Limi	ted Liability Co	ompany)	
The enclosed member, resignation or dissocia	ation and fee	(s) are submitted for filing.	
Please return all correspondence concerning to	this matter to	o :	
Ann Nash			SENS DEC 17
(Contact Person)		-	DEC
Put Your Name on Anything, L.L.C.		}*	
(Firm/Company)			7 Z
150 8th St.			 رن ا ن ن
(Address)	, ,		31
Key Colony Beach, FL 33051			
(City/State and Zip Code)		_	
For further information concerning this matter	r, please cal	l:	
Ann Nash	305 at (393-1218	
(Name of Contact Person)	(Area Coo	de & Daytime Telephone Numb	per)
Enclosed please find a check made payable to \$25 Filing Fee		Department of State for: ng Fee & Certified Copy	
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations P.O. Box 6327	
Clifton Building 2661 Executive Center Circle		Tallahassee, Florida 3231	4

Tallahassee, Florida 32301

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

			E
1. The name of the li	imited liability company as it	appears on the records of the	Florida Department
of State is: PUT	YOUR NAME ON ANYTHI	NG, L.L.C.	7
	nent/registration number assi	gned to this limited liability o	company is:
3. The date this men	nber/manager withdrew/resig	ned or will withdraw/resign is	s:
4. I.	ERAL STORE, INC	, hereby withdraw/resign	
- Ba	me of Person Resigning)		
		limited liability company has	s been notified of my
Signature of Dis	ssociating Member or Resign	ing Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		