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COVER LETTER

TO: Registration Section Division of Corporations

SURJECT: Pink Beauty's Center, L.L.C.

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Esmeralda H. Steel

(Contact Person)

Pink Beauty's Center, L.L.C.

(Firm/Company)

7505 SW 140th Avenue

(Address)

Miami, FL 33183

(City/State and Zip Code)

For further information concerning this matter, please call:

Esmeralda H. Steel

.,786 \382-8

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

□ \$25 Filing Fee

■ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (12/13)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it ap of State is: Pink Beauty's Center, L.L.C	-	artment	
2. The Florida document/registration number of this L13000028130	limited liability company is:	2014 MAR I	
3. The date this member withdrew or will withdraw	is: April 1, 2014	8 [
_{4. I.} Esmeralda H. Steel	, hereby resign as a managing mer	nber [: ##
(Print Name of Person Resigning)	(Print Title)	80	
of this limited liability company and affirm the lim resignation in writing.	nited liability company has been notified	of my	
Demeralda HSteel			
Signature of Resigning or Dissociating Manager	r, Member		

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)