# L13000 113467

(Re	equestor's Name)	
(Address)		
(Address)		
		,
(City/State/Zip/Phone #)		
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nar	ne)
•	,	,
(Document Number)		
(50	ournoin runnbery	
Cartified Caulan	C-+16	C
Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
		ŀ

Office Use Only



000252910140

11/04/13--01016--025 \*\*35.00

2013 DEC -6 PM 12: 33

L Crine



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2013

JENINE ADAMS 13020 HARTUNG AVE PENSACOLA, FL 32506

SUBJECT: VERACITY SALON LLC

Ref. Number: L13000113467

We have received your document for VERACITY SALON LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 013A00025933

#### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Veracity Salon (Name of Limited Liability Company)	LLC		
The enclosed member, managing member or manager resignation filing.	and fee(s) are submitted for		
Please return all correspondence concerning this matter to:	·		
Jenine Adams (Contact Person)			
Veracity Salon LLC (Firm/Company)			
13020 Hartung Ave	ECHETAIN -6		
Pensacola FL 32506 (City/State and Zip Code)	PM I2: 33		
For further information concerning this matter, please call:	<b>₹</b> 33		
Tenine Adams at (850) 221-0/61  (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for:  \$\square\$ \$\s			
	LING ADDRESS: stration Section		

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

CR2E079 (5/06)

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



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the	limited liability company as it appears on the	e records of the florida Department
of State is:	Veracity Salon	
	vility company was organized under the laws	人 流動 6 F
	ument/registration number of this limited liab	bility company is:
	uglas Adams, hereby res	sign as a Arm Manager Manager
of this limited lia resignation in wr	bility company and affirm the limited liabilititing.	y company has been notified of my
All	//er	·
Signature of Res	igning Member, Managing Member or Mana	ger
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	