

L13000-139555

(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:

Office Use Only



100253223961

10/28/13--01005--008 **25.00

FILED
2013 OCT 28 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Guffigan OCT 30 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tamara Stefanec, MBA
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

Tamara Stefanec, MBA
(Contact Person)

Cape Barber Shop, LLC
(Firm/Company)

118 SE 44th St
(Address)

Cape Coral FL 33904
(City/State and Zip Code)

For further information concerning this matter, please call:

Tamara Stefanec, MBA at (440) 409-6078
(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

Check # 1552

☐ \$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



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 records of the Florida Department of State is: Cape Barber Shop, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L 13000139555

4. I, Tamara Stefanec, MBA, hereby resign as a Managing Member
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

T. Stefanec
Signature of Resigning Member, Managing Member or Manager

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

Check #1552

FILED
2019 OCT 28 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA