

L14000026755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

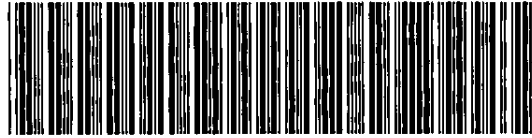
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Beauty Medica

(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:

Elena Gorbunova

(Contact Person)

Beauty Medica, LLC

(Firm/Company)

2721 NE 53rd Street

(Address)

Lighthouse Point FL 33064

(City/State and Zip Code)

For further information concerning this matter, please call:

Elena Gorbunova

(Name of Contact Person)

at 207 4167091

(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

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14 JUN 11 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 24, 2014

ELENA GORBUNOVA  
BEAUTY MEDICA LLC  
2721 NE 53RD STREET  
LIGHTHOUSE POINT, FL 33064

SUBJECT: BEAUTY MEDICA LLC  
Ref. Number: L14000026755

We have received your document for BEAUTY MEDICA LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on June 18, 2014.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers  
Regulatory Specialist

Letter Number: 814A00013690

*want it filed.  
7/3  
dec*



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Beauty Medica

2. The Florida document/registration number assigned to this limited liability company is:  
L14000026755

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 06/01/2014

4. I, Olga Iarossevitch, LLC, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGMR

(Print Title)

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

OLGA IAROSSEVITCH on behalf of an  
entity  
Olga Iarossevitch LLC  
Signature of Dissociating Member or Resigning Manager

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