## L/4000055133

(Requesto	or's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documer	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:
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Office Use Only



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SECRETÄRYÖF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

Registration Section

TO:

Division of Corporations
SUBJECT: One Heart Yoga Studio (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:
Eldie Madewell (Contact Person)
One Heart Yoga Studio (Firm/Company)
2993 W. 10th Street (Address)
Panama City, FL 32401 (City/State and Zip Code)
For further information concerning this matter, please call:
Flodie Madewell at (850) 890-1597  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sumset\$ \$\\$55\$ Filing Fee & Certified Copy

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

CR2E079 (2/14)

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

STREET/COURIER ADDRESS:



FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## 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)

1. The name of the li	mited liability company as it appears on the records of the Florida Department
of State is:	One Heart Yoga, LLC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
L14000055	133
3. The date this men	nber/manager withdrew/resigned or will withdraw/resign is: 10/1/3014
4. I, Jay F (Print National)	ne of Person Resigning), hereby withdraw/resign as a
May	rint Tide)
of this limited liab resignation in writ	ility company and affirm the limited liability company has been notified of my ing.
<del></del>	oley Goker
Signature of Dis	sociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)