# 114000114868

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT . MAIL	
(Business Entity Name)	
(Document Number)	
ertified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	
Office Use Only	
9	
11.02	



000305202330

11/07/17--01011--018 \*\*85.00

D SCOTT NOV 8 2017

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: RED Cheefah 409A (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:
Wichole J Mc Rowali (Contact Person)
Ress Cheetal Yoga (Firm/Company)
2282 SW 15 Street
MiAni, FIA 33145 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 388-7589 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  S25 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 (2/14)



### 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 limited liability company as it appears on the records of the Florida Department
of State is: RED Cheedal YOGA
2. The Florida document/registration number assigned to this limited liability company is:
<u>L 14000 114868</u>
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/01/2017
4. I, Alobso SANChez, hereby withdraw/resign as a  (Print Name of Person Resigning)  Hanagal  (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Signature of Dissociating-Meinber or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)