

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Au	uress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
	siness Entity Nan	
(Du	siness Entity Nan	ne)
(Do	cument Number)	
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	





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JUN 2 8 2016 Y SULKER

COVER LETTER

SUBJECT: WATCH & JEWELRY SERVICE BY BENNY LLC	
(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:	
SILVANA ZARGON	
(Contact Person)	
(Firm/Company)	
910 N.W. 96th AVE.	
(Address)	
Plantation, FLORIDA 33324	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
SILVANA ZARGON at 954, 980-9916	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for: \$\sum_{\$25\$ Filing Fee}\$ \sum_{\$55\$ Filing Fee & Certified Copy}\$	
STREET/COURIER ADDRESS: MAILING ADDRESS:	

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32314

CR2E079 (2/14)

Registration Section Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

Clifton Building

TO: Registration Section

Division of Corporations



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: WH	THE JEWELRY SERVICE BY BENNY LLC
2. The Florida docu	ument/registration number assigned to this limited liability company is:
L14000	117494
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: JUNE 21, 2016 NA ZARGON , hereby withdraw/resign as a mame of Person Resigning) Member, Vice-Presiding Member, Secretary (Print Title)
(Print N	ame of Person Resigning)
Manager,	Member, Vice-Presiding Member, Scarets
	p-prof.
of this limited lia	bility company and affirm the limited liability company has been notified of my
resignation in wr	iting
	
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)