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STARE COOK SIGIL

COVER LETTER

Divis	ion of Corporations			
SUBJECT:	QUEEN OF KING NAILS	s, LLC		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Name of	Limited Liability Com	pany)	
The enclosed	I member, resignation or diss	sociation and fee(s)	are submitted for	filing.
Please return	all correspondence concerni	ing this matter to:		
ANNA TRA	.N			
	(Contact Person)			
QUEEN OF	KING NAILS, LLC			
·	(Firm/Company)			
13355 BEL	CHER RD. B			
	(Address)			e tuber still
LARGO, FL	_ 33773			ALLAN BO FA
-	(City/State and Zip Code)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		题言
For further in	nformation concerning this m	natter, please call:		OCT 18 PM 4: 06 LAHASSEE, ALORINA
LARGO, FL	33773	727	504-8873	LONIE O.
(N	ame of Contact Person)		& Daytime Telephor	ne Number)
Enclosed plea	ase find a check made payab	le to the Florida De	epartment of State	for:

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

TO: Registration Section

CR2E079 (2/14)

2 \$25 Filing Fee

MAILING ADDRESS:

□ \$55 Filing Fee & Certified Copy

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



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)

	limited liability company as it EEN OF KING NAILS, LLC.	appears on the records of the Florida Department
2. The Florida doci	_	igned to this limited liability company is:
BICHHILIC	NC	ned or will withdraw/resign is: hereby withdraw/resign as a
MANAGING I	MEMBER	
of this limited lia resignation in wr		limited liability company has been notified of my
	issociating Member or Resigni	
	\$25.00 (Required) \$30.00 (Optional)	