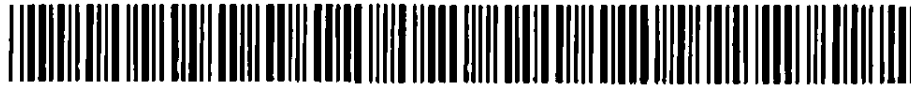


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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LEVIN LAW & MEDIATION GROUP
Account Number : I20140000093
Phone : (941)953-5300
Fax Number : (941)953-5355

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GRAPE A DAY, LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Grape A Day 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:

Jerome S Levin

(Contact Person)

Levin Law & Mediation Group

(Firm/Company)

1444 First Street Suite A

(Address)

Sarasota, FL 34236

(City/State and Zip Code)

For further information concerning this matter, please call:

Jerome S. Levin

(Name of Contact Person)

at (941) 953 5300

(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

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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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 limited liability company as it appears on the records of the Florida Department of State is: Graps A Day LLC

2. The Florida document/registration number assigned to this limited liability company is:
L15000082051

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/16/2024

4. I, Bruce Heiman, hereby withdraw/resign as a
(Print Name of Person Resigning)

Managing Member

(Print Title)

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

Signed by:

Bruce Heiman

Signature of Dissociating Member or Resigning Manager

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

FILED
2024 SEP 23 AM 11:47
TALLAHASSEE, FLORIDA
CLERK OF THE DIVISION OF CORPORATIONS