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## **COVER LETTER**

**Mailing Address:** 

P.O. Box 6327

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:	Registration Section			
	Division of Corporations			
SUBJE	LuLu Belle's Wonder Wear, LLC			
	(Name of	Limited Liability Con	ipany)	
The end	closed member, resignation or diss	sociation and fee(s	) are submitted	for filing.
Please r	eturn all correspondence concern	ing this matter to:		
Daniel D	ellaVecchia			
	(Contact Person)		-	
LuLu Be	lle's Wonder Wear, LLC			
	(Firm/Company)		•	
13300 W	alsingham Road Unit 29			
	(Address)	<del></del>	•	
Largo, FI	. 33774			
	(City/State and Zip Code)			~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
For furt	her information concerning this m	natter, please call:		1022 JUL 20
Daniel D	ella Vecchia	561 at (	703-6789 )	
	(Name of Contact Person)	(Area Code	& Daytime Telep	ate for: 24
Enclose	d please find a check made payab	le to the Florida D	epartment of St	ate for:
	Filing Fee		Fee & Certified	d Copy

Street Address:

Registration Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810



## 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 record	ds of the Florida	Depar	tment
of State is: LuLu	Belle's Wonder Wear, LLC				<u> </u>
2. The Florida docu 81-2456285	ument/registration number	assigned to this limited li	iability company	is:	
	mber/manager)withdrew/r	esigned or will withdraw/	/resign is:	2020	
4. I, Linda C. Sawyer		hereby withdraw	/resign as a		
(Print N	ame of Person Resigning)				
President	•		•	2022 JUL	
	(Print Title)	-	-; ·	][][	٠.
of this limited lial	bility company and affirm	the limited liability comp	any has been no	tified o	of my
resignation in writer	10 <			ATTH: 24	أدري
Filing Fee:	ssociating Member or Res	ilgning Manager			
Certified Copy:	\$30.00 (Optional)				