116000091568

(Requestor's Name)					
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(City/State/Zip/Phone #)					
(GR) GRACE ZIPIT HOTE II)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only



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COVER LETTER

_	gistration Section		
Div	rision of Corporations		
SUBJECT			
	(Name of I.	Limited Liability Cor	mpany)
The enclose	ed member, resignation or disso	ociation and fee(s	s) are submitted for filing.
Please retu	rn all correspondence concernii	ng this matter to:	
Elina Mc I	Kinney		
 	(Contact Person)		_
	(Firm/Company)		_
311 Talla	Way		-
····	(Address)		- ·
Niceville,	FL 32578		
	(City/State and Zip Code)		_
For further	information concerning this ma	atter, please call:	
Elina McK	Kinney	386 at (344-2887
((Name of Contact Person)	(Area Code	& Daytime Telephone Number)
	lease find a check made payabling Fee		•
STREET/	COURIER ADDRESS:		MAILING ADDRESS:
Registratio			Registration Section
Clifton Bui	f Corporations		Division of Corporations P.O. Box 6327
	utive Center Circle		Tallahassee, Florida 32314
Tallahasse	e, Florida 32301		

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	s it appears on the records of the Florid	da Department
of State is:	International Bikini Model	Search LLC	- o .
<u> </u>			
2. The Florida docu	ment/registration number a	ssigned to this limited liability compar	ny is:
L16000091568			= .
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:	2018 ;
		, hereby withdraw/resign as a	· J
(Print N	lame of Person Resigning)		
Manager			
	(Print Title)		
of this limited lia resignation in wr		ne limited liability company has been t	notified of my
Thu	Marc		
Signature of Di	ssociating Member or Resig	gning Manager	
=	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		