

L16000127943

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : WHOLE TAX PROFESSIONAL SERVICES, INC.
Account Number : I20200000179
Phone : (786)253-9951
Fax Number : (305)397-1052

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

Email Address: wholatax@gmail.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
UNDERFULL LABEL, LLC**

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TALLAHASSEE, FLORIDA

421000299596.

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)

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1. The name of the limited liability company as it appears on the records of the Florida Department of State is: UNDERFULL LABEL, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000127943

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 08/01/2021

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

AMBR

(Print Title)

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

A handwritten signature in black ink, appearing to read "Daniela Sanabria", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager