L16000154812

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FACIALMANIA 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:

REGINA MEDEIROS
_____
(Contact Person)

CSG - CAPITAL SERVICES GROUP INC
_____
(Firm/Company)

446 W HILLSBORO BLVD
_____
(Address)

DEERFIELD BEACH, FL 33441
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

REGINA MEDEIROS   954   427-4770
_____   at (_____) _____
(Name of Contact Person)   (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

STREET/COURIER ADDRESS: **MAILING ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
Clifton Building   P.O. Box 6327
2661 Executive Center Circle   Tallahassee, Florida 32314
Tallahassee, 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 it appears on the records of the Florida Department of State is: FACIALMANIA LLC _____.

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

   L16000154812 _____.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: _11/05/16_

4. I, FERNANDA MOSCARDINI _____, 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.

_____

Signature of Dissociating Member or Resigning Manager

Filing Fee:
Certified Copy: