

416000218911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

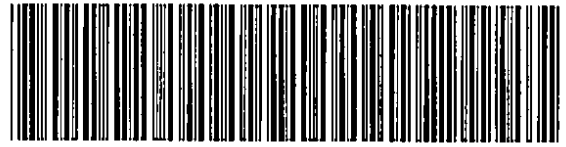
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 JUL 15 PM 4:54

Resignation of  
AMBR

JUN 03 2019

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Nourishing Minds Nutrition  
(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:

Meghan Dixon  
(Contact Person)

Nourishing Minds Nutrition  
(Firm/Company)

421 white Ranch Rd.  
(Address)

Blanco, TX 78606  
(City/State and Zip Code)

For further information concerning this matter, please call:

Meghan Dixon at (830) 265-8004  
(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:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

FILED  
STATE  
SECRETARY OF  
CORPORATIONS  
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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: Nourishing Minds Nutrition

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

L160000218911

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/1/2019

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

co-owner / 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: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
DIVISION OF STATE  
CORPORATIONS  
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TALLAHASSEE, FLORIDA