## 117000045921

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	Starfish Sisters, LLC				
	(Name of Limited Liability Company)				
The e	nclosed member, resignation or dissoci	ation and fee(s	are submitted for filing.		
Pleas	e return all correspondence concerning	this matter to:			
Scott	t Patrou				
	(Contact Person)		-		
Ginn	& Patrou, PA				
	(Firm/Company)		_		
770 /	A1A Beach Blvd., Ste D.				
	(Address)		_		
St. A	ugustine, FL 32080				
_	(City/State and Zip Code)		<del></del>		
For it	urther information concerning this matte	er, please call:			
		904 at (	461-3000		
	(Name of Contact Person)		& Daytime Telephone Number)		
	osed please find a check made payable t 5 Filing Fee		Department of State for: g Fee & Certified Copy		
	EET/COURIER ADDRESS:		MAILING ADDRESS:		
-	strution Section ion of Corporations		Registration Section Division of Corporations		
	on Building		P.O. Box 6327		
	Executive Center Circle		Tallahassee, Florida 32314		
Tallal	hassee, Florida 32301				

CR2E079 (2/14)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGERY FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of t	the limited liability company as it	appears on the records of the Florida Department
of State is:	TARFISH SISTERS, LLC	
2. The Florida de	ocument/registration number assi	gned to this limited liability company is:
L170000459	921	
3. The date this i	member/manager withdrew/resign	ned or will withdraw/resign is: 6-11-2018
4. i, Rebecca S	Sosebee	, hereby withdraw/resign as a
(Prin	nt Name of Person Resigning)	
AMBR		
	(Print Title)	
of this limited leading of this limited leading in the second of this limited leading in the second of the secon		limited liability company has been notified of my
Lebecco	a Sosehw	
Signature of	Dissociating Member or Resignin	ng Manager
Filing Fee:	\$25.00 (Required)	

\$30.00 (Optional)

Certified Copy: