

L170000 53273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

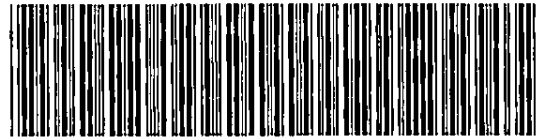
(Business Entity Name)

(Document Number)

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19 APR 23 PM 5:38
TALLAHASSEE, FLORIDA

O SIMMONS
MAY 03 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Salvador Dogi, 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:

Angela Ardolino
(Contact Person)

Salvador Dogi, LLC d/b/a Beautify the Beast
(Firm/Company)

163 Carts Lake Lane
(Address)

Lutz, FL 33548
(City/State and Zip Code)

For further information concerning this matter, please call:

Angela Ardolino at 305 431-0717
(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



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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CORPORATION DIVISION
FLORIDA

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

2. The Florida document/registration number assigned to this limited liability company is:
L17000053273

3. The date this member/manager withdrew/resigned or will withdraw/resign is: December 31, 2018

4. I, David E. Estevez, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGR

(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

[Handwritten signature]
2018