## 47000075548

(Requestor's Name)				
(Address)				
(Address)				
(City/	State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

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08/08/18--01018--631 ++25.00



## Law Offices of Leon R. Margules, P.A.



Leon R. Margules, Esquire. Zachary D. Margules, Esquire.

August 3, 2018

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

Re: 2 GIRLZ VENTURES, LLC.

To whom it may concern.

The enclosed resignation/dissociation fees are submitted for filing.

Please return all correspondence concerning this matter to:

Zachary D. Margules, Esquire Law Offices of Leon R. Margules, P.A. 633 South Andrews Avenue, Suite 500 Fort Lauderdale, FL 33301

For further information concerning this matter, please call:

Zachary D. Margules, Esquire at (954) 587-0482

Enclosed please find a check made payable to the Florida Department of State for:

\$25.00 Filing Fee

Sincerely,

Źachary D. Margules, Esq.



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the li	mited liability company as it a	ppears on the records of th	ne Florida Department
of State is:	a GIRLZ	Ventules	LLC.
2. The Florida docum	nent/registration number assign	ned to this limited liability	company is:
G170000	·44367	_·	
	ber/manager withdrew/resigne		
4.1. Joanna (Prim Nam	L. Ca(bone)	_, hereby withdraw/resign	as a
	Member 8 50%	CWLLC	
of this limited liabil resignation in writing	fity company and affirm the lin	nited liability company ha	s been notified of my
Signature of Disso	ociating Member or Resigning	Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		