# L17000161834

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	e)
(Document Number)		
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Resignation

AUG 1 3 2019

### **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ	ECT: Hally Lea	of Limited Liability Company)
The en	nclosed member, resignation or o	dissociation and fee(s) are submitted for filing.
Please	return all correspondence conce	erning this matter to:
	TEHRANI (Contact Person)	
ij	(Firm/Company)  P.O. Box 19404  (Address)	
	(Address)	
	anama city beach, Fi	L 32417
For fu	rther information concerning thi	s matter, please call:
H	T Tehrani	at ( <u>020</u> ) <u>960-000</u> <del>7</del>
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
-	sed please find a check made pay 5 Filing Fee	yable to the Florida Department of State for:  \$\iii \text{\$\text{\$\text{\$\text{\$\text{\$}}}}\$} \$\$\sec{\text{\$\text{\$\text{\$}}}} \$\$

#### STREET/COURIER ADDRESS:

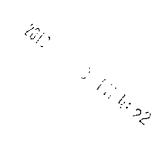
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

#### MAILING ADDRESS:

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







## 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: HOLLY LEAF, LLC
2. The Florida document/registration number assigned to this limited liability company is:
L17000161834
3. The date this member/manager withdrew/resigned or will withdraw/resign is:
4. I, ARIANNA TEHRANT, hereby withdraw/resign as a (Print Name of Person Resigning)
(Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
A
Signature of Dissociating Member or Resigning Manager

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)