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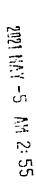
(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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COVER LETTER .

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TO: Registration Section	
Division of Corporations	
SUBJECT: GIRL POWER INVESTMENTS LL	С
	nited Liability Company)
The enclosed member, resignation or dissoc	iation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
DIANA HINCAPIE	
(Contact Person)	
GIRL POWER INVESTMENTS LLC	
(Firm/Company)	
1002 NE 24TH AVE	
(Address)	
HALLANDALE FL 33009	
(City/State and Zip Code)	
For further information concerning this mat	ier, please call:
DIANA HINCAPIE	305 342 9394 _ at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$\Bigsim \\$25 \text{Filing Fcc}\$	to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 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)

	limited liability company as	s it appears on the records of t	the Florida I	Department
		ssigned to this limited liability	y company	is:
3. The date this mo	ember/manager withdrew/res	signed or will withdraw/resigr	01/01/20 n is:)21
14 P CHE C 4 CT	200	, hereby withdraw/resign as a		
MANAGER				
	(Print Title)		 ;	2021
resignation in wr		he limited liability company h	as been not	
	\$25.00 (Required) \$30.00 (Optional)			