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COVER LETTER

_	istration Section ision of Corporations					
SUBJECT:	Ohana Embroidery I.I.C.					
SUBJECT.	(Name of Limited Liability Company)					
The enclose	ed member, resignation or disso	ociation and fee(s	s) are submitted for filing.			
Please retur	n all correspondence concernit	ng this matter to:				
Paul Farm	er					
	(Contact Person)		_			
Ohana Em	nbroidery					
	(Firm/Company)		_			
3306 18th	Ave W					
	(Address)		_			
Bradenton	Florida, 34205					
	(City/State and Zip Code)		_			
For further i	information concerning this ma	atter, please call:				
Paul Farm	er	941 at (957-8543			
4)	Name of Contact Person)		& Daytime Telephone Number)			
Enclosed ple ■ \$25 Filin	ease find a check made payable g Fee		Department of State for: g Fee & Certified Copy			
Registration Division of Clifton Buil 2661 Execut	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

CR2E079 (2/14)



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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)

1. The name of the	· limited li	ability company as it	appears on the records of the Florida Department
of State is:	na Embro	oidery LLC	,
2. The Florida doc	ument/reg	istration number assi	gned to this limited liability company is:
82-3598	585	L17000248364	
3. The date this me	ember/mar	nager withdrew/resig	ned or will withdraw/resign is:
4. I Alicia Farm	ner	· -	, hereby withdraw/resign as a
(Print N	lame of Pers	on Resigning)	-
AR	_	_	
	(Print Title)		
of this limited lia resignation in wr		pany and affirm the	limited liability company has been notified of my
Alla	in I	ones.	
Signature of Di	ssociating	Member or Resigni	ng Manager
Filing Fee:	\$25.00	(Required)	
Certified Copy:		(Optional)	