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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: TLB Tiles Service (Name of Limited L	es and more LLC.
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Jennifer Boya (Contact Person)	
(Firm/Company)	
2977 Ala Ilima St. Apt 308	
Honolulu, HT 96818 (City/State and Zip Code)	
For further information concerning this matter, p	lease call:
Tennifer Boya at (Name of Contact Person)	777) 589-9844  Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the ☐ \$25 Filing Fee	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

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)

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