L1800085201

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COVER LETTER

TO: Registration Division of	Section Corporations		
Moell SUBJECT:	la Beauty LLC		
	(Name of L	imited Liability Con	npany)
The enclosed meml	per, resignation or disso	ociation and fee(s) are submitted for filing.
Please return all co	rrespondence concernir	ng this matter to:	
Tenneil Turner			
	(Contact Person)		_
Moella Beauty LL	.C		
	(Firm/Company)		_
c/o 5713 NW 85tl	h Ave		
	(Address)		_
Tamarac, Florida	, 33321		
	(City/State and Zip Code)		-
For further informa	ation concerning this ma	atter, please call:	
Tenneil Turner		954 at (899-8425
(Name of	Contact Person)		& Daytime Telephone Number)
Enclosed please fir ■ \$25 Filing Fee	nd a check made payabl		Department of State for: g Fee & Certified Copy
STREET/COURI			MAILING ADDRESS:
Registration Section Division of Corpor			Registration Section Division of Corporations
Clifton Building	ations		P.O. Box 6327
2661 Executive Ce Tallahassee, Florid			Tallahassee, Florida 32314

CR2E079 (2/14)



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)

of State is: Moe	lla Beauty LLC		·
2. The Florida doc	ument/registration number as	ssigned to this limited liab	oility company is:
L1800008520	1		
3. The date this me	mber/manager withdrew/res	igned or will withdraw/res	sign is:
Tiffany Turner		, hereby withdraw/re	esign as a
	lame of Person Resigning)		C
Member			
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm thiting.	e limited liability compan	y has been notified of my
Land			
Signature of D	issociating Member or Resig	ning Manager	
_	\$25.00 (Required) \$30.00 (Optional)		PILED 2019 JUL -2 AHIO 3LOMEIAN SEELFLOO