## L18000 101719

(Request	or's Name)				
(Address	)				
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(City/Stat	e/Zip/Phone #)				
PICK-UP	] WAIT MAIL				
(Busines:	s Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
	1				

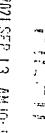
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## **COVER LETTER**

TO:	Regis	stration Section		
	Divis	ion of Corporations		
SUBJ	ECT:	BBALANCED LIFE, L.L.C.		
		(Name of	Limited Liability Co	ompany)
The er	nclosed	l member, resignation or dis	sociation and fee	(s) are submitted for filing.
Please	return	all correspondence concern	ing this matter to	<b>:</b>
Olga M	languno			
	•	(Contact Person)		_
BBALA	ANCED	LIFE, L.L.C.		
		(Firm/Company)		<del>_</del>
3303 Pc	ort Roya	ale Drive South, Apt 102		
		(Address)	······································	
Fort La	uderdal	e, FL 33308		
		(City/State and Zip Code)		<del></del>
For fu	rther in	nformation concerning this n	natter, please call	l:
Olga M	languno		954 at (	600-8682
	(N	ame of Contact Person)		le & Daytime Telephone Number)
Enclos	sed ple	ase find a check made payab	ole to the Florida	Department of State for:
<b>\$25</b>				ng Fee & Certified Copy
	Mailin	ng Address:		Street Address:
	Regis	stration Section		Registration Section
		ion of Corporations		Division of Corporations
		Box 6327 hassee, FL 32314		The Centre of Tallahassee
	ranal	11455CC, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## 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)

	e limited liability company a	• •	of the Florida Department	
2. The Florida doc 83-2830958	cument/registration number	assigned to this limited liab	oility company is:	
3. The date this m	ember/manager withdrew/re	esigned or will withdraw/re	July 1.2021	
Gigalla Dalhi		, hereby withdraw/resign as a		
Manager	rume of 1 erson Kesigning)			
<del></del>	(Print Title)			
of this limited lia resignation in w	ability company and affirm triting.	the limited liability compar	ny has been notified of my	
J.al	&BeW)		2021 SEP 13 SECREDING	
Signature of D	issociating Member or Resi	gning Manager	10 TO	
_	\$25.00 (Required) \$30.00 (Optional)		MHO: 5	