## L18000128790

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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## **COVER LETTER**

TO:

CR2E079 (2/14)

TO:	_	stration Section ion of Corporations			
SUBJE	Coeur D Alene Beauty LLC				
00001		(Name of	mpany)		
The en	closed	I member, resignation or dis	sociation and fee(	s) are submitted for filing.	
Please	return	all correspondence concern	ing this matter to:		
Gary S	S Car	leton			
		(Contact Person)		_	
		(Firm/Company)		_	
		(rimvCompany)			
639 A	rbor L	ake Lane			
		(Address)		_	
Tampa	a, FL	33602			
		(City/State and Zip Code)		_	
For fur	ther ir	nformation concerning this r	natter, please call:		
Gary S	S Car	leton	941 at (	681-1365	
	(N	ame of Contact Person)		& Daytime Telephone Number)	
		ase find a check made payab Fee			
Registr Divisio Clifton 2661 E	ation on of C Build xecuti	OURIER ADDRESS: Section Corporations ling ive Center Circle Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

STATEMENT OF RESIGNATION OF GARY S. CARLETON AS MANAGER FROM Coeur d Alene Beauty LLC, A FLORIDA LIMITED LIABILITY COMPANY PURSUANT TO  $\S$  605.0216 (2), Florida Statutes:

- (a) The name of the limited liability company is Coeur D Alene Beauty LLC
- (b) The Florida Document/Registration Number is L18000128790
- (c) The name and signature of the resigning manager is: Gary S. Carleton, signature below.
- (c) The date the resigning manager resigned or will resign: October 17, 2019
- (d) I, Gary S. Carleton, affirm that the limited liability company has been notified of my resignation in writing by the service of a copy of this Statement of Resignation by Overnight Delivery on October 17, 2019 as follows:

DP Sales INC 12522 NW 10<sup>th</sup> Court Sunrise, FL 33323

Kevin S. Brady 1111 E Sunrise Blvd STE 714 Ft Lauderdale FL 33304

Gary S. Carleton
639 Arbor Lake Lane
7
Tampa, FL 33602
941-681-1365
Date: October 17, 2019
95

Ss:

State of Florida, County of Pinellas

Before me the undersigned notary public did appear this date Gary S. Carleton, who did execute this document in my presence. Subscribed, sworn to, and acknowledged before me this 19 day of October, 2019.

Notary Public Commission Expires:

