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COVER LETTER

TO: Registration Section Division of Corporations		
MARVELOUS IDEAS LLC SUBJECT:		
(Name of Limited Liability Company)		
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	natter to:	
RENEE FIGUEROA		
(Contact Person)		
MARVELOUS IDEAS LLC	-2	
(Firm/Company)	SEC.	
765 ELM ST	LEA 20	
(Address)		
SAFETY HARBOR, FL 34695	SEGRETARASSES, EL	
(City/State and Zip Code)		
For further information concerning this matter, ple	ease call:	
RENEE FIGUEROA 8	13 586-4271	
	rea Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the ■ \$25 Filing Fee	Florida Department of State for: 555 Filing Fee & Certified Copy	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

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)

1. The name of the limited liability company	as it appears on the records of the Florida Department
of State is: MARVELOUS IDEAS LLC	
2. The Florida document/registration number	assigned to this limited liability company is:
L18000163897	•
3. The date this member/manager withdrew/re	esigned or will withdraw/resign is:
4. I,	, hereby withdraw/resign as a
(Print Name of Person Resigning)	
MANAGER	
(Print Title)	
of this limited liability company and affirm	the limited liability company has been notified of my
resignation in writing.	₩
Call The	TLAH.

Signature of Dissociating Member or Resigning Manager

Filing Fee:

\$25.00 (Required)

Certified Copy: