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COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	Lil Buddy's LLC		_
	(Name of Lin	nited Liability Con	npany)
The enclosed	d member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
Tangela A	Dawes		
	(Contact Person)		-
Lil Buddy's	LLC		
	(Firm/Company)	 = ·- 	-
1225 9th s	t w		
	(Address)		_
Bradenton	FL. 34205		
	(City/State and Zip Code)		
For further i	nformation concerning this man	ter, please call:	
Tangela A	Dawes	941 at (726-8232
(1)	Name of Contact Person)		& Daytime Telephone Number)
Enclosed ple ■ \$25 Filin	ease find a check made payable g Fee		Department of State for: g Fee & Certified Copy
	COURIER ADDRESS:		MAILING ADDRESS:
Registration	Section Corporations		Registration Section Division of Corporations
Clifton Buil	•		P.O. Box 6327
2661 Execu	tive Center Circle , Florida 32301		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)

	(Pursuant to 603	5.0216, Piorida Statutes)	LED FIGURES
1. The name of the of State is:		as it appears on the records of	இத் ஏ the Florigan Department
	ument/registration number	r assigned to this limited liabilit	y company is:
3. The date this me	mber/manager withdrew/i	resigned or will withdraw/resig	n is:
Dava Dawas		, hereby withdraw/resig	
Manager			
	(Print Title)	•	
of this limited lia resignation in wr		the limited liability company h	nas been notified of my
	f Dues issociating Member or Re	signing Manager	
•	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		