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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: 104 1065 HCQ	mited Liability Company)
The enclosed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
Georgia E. Walker	Paul
Tiny Toes Academy (Firm/Company)	LLC
1840 S.W. 155th Av	<u>e</u>
Miramar, FL 330 (City/State and Zip Code)	27
For further information concerning this ma	tter, please call:
Chevraia E. Walker Faul (Name of Contact Person)	at (<u>954</u>) <u>665-5478</u> (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable ☑ \$25 Filing Fee	to the Florida Department of State for: Street Address:
Mailing Address:	
Registration Section	registration section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314



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 I	imited liability company as	it appears on the re	ecords of the Fl	orida Departm	ent
of State is:	ny Toes Acad	demy LL	<u>C</u>		
2. The Florida docu	ment/registration number as	signed to this limit	ed liability con	ipany is:	
<u> 180001</u>	98540	 '			
3. The date this men	nber/manager withdrew/res	igned or will withdi	raw/resign is: _	3/1/20	<u>)</u>
4.1. Ragaste	n Paul me of Person Resigning)	, hereby withd	lraw/resign as a	1	
	rint Title)				
of this limited liab resignation in writ	ility company and affirm th ing.	e limited liability co	ompany has be	en notified of n COLAPR -	
Signature of Dis	sociating Member or Resig	ning Manager	-	$m_{\rm C}$;- (:
_	\$25.00 (Required) \$\sqrt{\$25.00 (Optional)}			AHTTE OZ FEGRIÐ,	