

L18000243695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

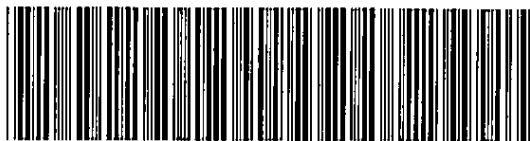
(Business Entity Name)

(Document Number)

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R. WHITE
OCT 09 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sprout Kids Agency, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Shaina Miller c/o Barry T. Shevlin

(Contact Person)

Shevlin & Atkins

(Firm/Company)

1111 Kane Concourse, suite 619

(Address)

Bay Harbor Islands, FL 33154

(City/State and Zip Code)

For further information concerning this matter, please call:

Barry T. Shevlin

(Name of Contact Person)

at 305 868-0304

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
☒ \$25 Filing Fee
☐ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

CR2FEU9 (2/14)



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

2019 SEP 23 PM 5:40

**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: Sprout Kids Agency, LLC
 2. The Florida document/registration number assigned to this limited liability company is:
L18000243695
 3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/16/19
Susanne M. Thomas
 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.

Susanne M. Thomas

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)