

L18000 259 697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

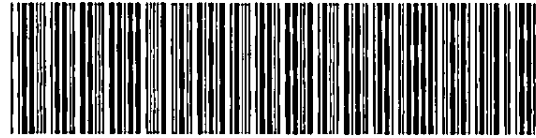
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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02/25/19--01021--005 \*\*25.00

02/25/19--01021--006 \*\*30.00

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2019 FEB 26 PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FL

R. WHITE  
MAR 01 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Beyond Beauty Couture Hair 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:

Natacha Thermitus  
(Contact Person)

Beyond Beauty Couture Hair LLC  
(Firm/Company)

2875 NE 191st Street Suite 500  
(Address)

Aventura FL 33180  
(City/State and Zip Code)

For further information concerning this matter, please call:

Natacha Thermitus at (305) 318-4629  
(Name of Contact Person) (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



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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FL

**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: Beyond Beauty Couture Hair LLC

2. The Florida document/registration number assigned to this limited liability company is:

L1800002596917

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 2-20-19

4. I, Steve LARION, hereby withdraw/resign as a  
(Print Name of Person Resigning)

CEO/MGR  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my  
resignation in writing.

Steve LARION

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)