118000278051

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only

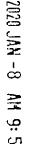


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COVER LETTER

TO:	Registration Section			
	Division of Corporations			
SUBJ	The Cozy Trip LLC JECT:			
	(Name of I	Limited	Liability C	Company)
The e	nclosed member, resignation or diss	ociatio	on and fee	e(s) are submitted for filing.
Please	e return all correspondence concerni	ng this	matter to	o:
Nelson	n Hou			
	(Contact Person)	******		_
The C	ozy Trip LLC			
	(Firm/Company)			
1007 [Lake Davenport Blvd			
	(Address)			
Daven	port FL 33897			
	(City/State and Zip Code)		•	_
For fu	orther information concerning this m	atter, p	olease cal	II:
Nelson	n Hou	at	347	3489255
	(Name of Contact Person)		<u> </u>	de & Daytime Telephone Number)
Enclo	sed please find a check made payabl	le to th	ie Florida	a Department of State for:
	5 Filing Fee			ng Fee & Certified Copy
	Mailing Address:			Street Address:
	Registration Section			Registration Section
	Division of Corporations			Division of Corporations
	P.O. Box 6327			The Centre of Tallahassee
	Tallahassee, FL 32314			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 Depa	artmer	ıt
of State is: The C	Cozy Trip LLC				,
2. The Florida doc	ument/registration number as	signed to this limited liability c	ompany is:		
3. The date this me	ember/manager withdrew/resi	gned or will withdraw/resign is	i 12/31/2019		
4. 1, SUJUN LI (Print A	ame of Person Resigning)	, hereby withdraw/resign a	ıs a		
MGR					
	(Print Title)				
of this limited lia resignation in wr		e limited liability company has	been notified	l of my	y
\$	MUL Li			20	
Signature of Di	ssodiating Member or Resign	ning Manager	ż	2020 JAN	. 14
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			-8 AH	, d (
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