

L18000 219317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

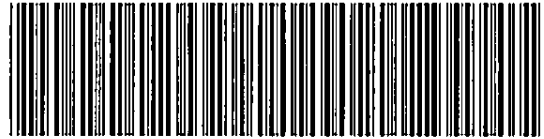
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
JUN 25 2024

Office Use Only



500431142925

06/11/24--01003--015 **25.00

FILED
2024 JUN 11 PM 4:19
61413 11004202

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HAVE HEART TATTOO, 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:

DAVID GRAHAM, JR.

(Contact Person)

HAVE HEART TATTOO, LLC

(Firm/Company)

141 NW 20th STREET, SUITE G4

(Address)

BOCA RATON, FL 33432

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID GRAHAM, JR.

at (561) 704-8810

(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

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



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 Department of State is: HAVE HEART TATTOO, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L18000279317

3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 1st 2024

4. I, PHILLIP ROSADO, hereby withdraw/resign as a

(Print Name of Person Resigning)

MEMBER

Phillip Rosado
(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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