## L18000293104

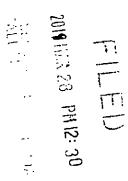
(Re	equestor's Name)	
(Ac	idress)	
/4		
(AC	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	ne)
(Dx	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Infinity Mail Bar 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:
Phony Naugen (Contact P)rsun)
Infinity Nail Dar LLC (Firm/Company)
825 Lavin Dr. (Address)
Pensacola FL 32506 (City/State and Zip Code)
For further information concerning this matter, please call:
Phony Name of Contact Person) at (850) 332 - 8826  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  S25 Filing Fee S55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

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

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

CR2E079 (2/14)







## 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:	Infinity Mail Bar LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L 18000	293104
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 3-25-19
4. I,	, hereby withdraw/resign as a lame of Person Resigning)
<u></u>	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Myn	ssociating Member or Resigning Manager
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)