## L19000027549

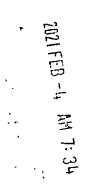
(Re	equestor's Name	;)		
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	es of Status		
Special Instructions to Filing Officer:				

Office Use Only



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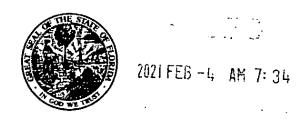
02/04/21--01016--009 \*\*25.00



O SIMMONS MAR 2 3 2021

## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	
Koala Kids LLC SUBJECT:	
	of Limited Liability Company)
The enclosed member, resignation or di	issociation and fee(s) are submitted for filing.
Please return all correspondence concer	ming this matter to:
Jason Acosta	
(Contact Person)	
(Firm/Company)	
28 Clinton Ct, Unit C	
(Address)	<del></del>
Royal Palm Beach, Fl 33411	
(City/State and Zip Code)	
For further information concerning this	matter, please call:
Jason Acosta	646 797-7779 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made paya  \$\begin{align*} \$ \$25 Filing Fee	able to the Florida Department of State for:  ☐ \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81
rananassee, 1 E 52517	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)

	limited liability company as in	appears on the records of the Florida Department
2. The Florida docu	ment/registration number ass	igned to this limited liability company is:
3. The date this mer	mber/manager withdrew/resig	ned or will withdraw/resign is: 04/05/2019
4. I, Jason Acosta		, hereby withdraw/resign as a
Manager	and by I craon reasymmy	
	Print Title)	
of this limited liab resignation in wri		limited liability company has been notified of my
	Cel	
Signature of Di	ssociating Member or Resigni	ng Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	