L19 CCC 102 723

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Reg	gistration Section		
Div	rision of Corporations		
SUBJECT	Holisticrats Yoga & Wellness		
	(Name of	Limited Liability Co	mpany)
The enclos	ed member, resignation or dis	sociation and fee(s) are submitted for filing.
Please retu	rn all correspondence concert	ning this matter to:	
Juliana Botti	ni		
	(Contact Person)		
Holisticrats '	Yoga & Wellness		
	(Firm Company)		_
2244 N. Uni	versity		
	(Address)		
Coral Spring	s, FL33071		
	(City/State and Zip Code)		_
For further	information concerning this	matter, please call:	
Juliana Botti	ni	908 at (566 7180
((Name of Contact Person)		e & Daytime Telephone Number)
Enclosed p	olease find a check made paya	ble to the Florida	Department of State for:
■ \$25 Fili	• •		g Fee & Certified Copy
Mai	iling Address:		Street Address:
	gistration Section		Registration Section
Div	rision of Corporations		Division of Corporations
	D. Box 6327		The Centre of Tallahassee
Tal	lahassee, FL 32314		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:	ticrats Yoga & Wellness	
2. The Florida doc	ument/registration numbe	er assigned to this limited liability company is:
L19000102723		
3. The date this me	ember/manager withdrew	resigned or will withdraw/resign is: 2/19/2021
4. I. Burgertown LLC		, hereby withdraw/resign as a
(Print)	Name of Person Resigning)	
Manager		
· · · · · · · · · · · · · · · · · · ·	(Print Title)	
		n the limited liability company has been notified of my
resignation in wr	nting.	
		Sugertown, LLC
Signature of D	issociating Member or Re	signing Manager
	\mathcal{T}	20 21
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	c u