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SECRETARY OF STATE

D. BRUCE NO 18 200

## COVER LETTER

TO: Registration Section Division of Corporati	ons	i I		
SUBJECT: EVERYTHING V		f Limited Liability C	Company)	<del></del>
The enclosed member, resign	ation or di	  sociation and fee	e(s) are submitted for	filing.
Please return all corresponde	nce concer	ning this matter t	o:	
Gonzalo Perez, Jr., Esq.				
(Contact	Person)		<del></del>	
Gonzalo Perez, Jr., P.A.				
(Firm/Co	mpany)	!!		<b>20</b>
7915 Coral Way				2020 JUL -2 SECRETAS TALLAND
(Addre	ss)		<del>_</del>	ALE -2
Miami, FI, 33155				AM 6: 48
(City/State a	nd Zip Code)		<del></del>	6. TA
For further information conce	rning this	matter, please ca	11:	<u>∞</u>
Gonzalo Perez, Jr., Esq.		305 at (	265-8228	
(Name of Contact Pe	rson)	(Area Co	de & Daytime Telepho	me Number)
Enclosed please find a check ☐ \$25 Filing Fee	made paya   		n Department of State ing Fee & Certified C	
Mailing Address: Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231			Street Address: Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	orations Iahassee Street, Suite 810
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 lia	bility com	pany as i	t appears on	the records of	of the Fl	orida De	epartn	nent
of State is:	thing Vogue.	LLC						_	<u> </u>
2. The Florida docu L19000192286	ıment/regis	stration nu	mber ass	igned to this	s limited liabi	lity com	pany is:	:	
3. The date this me		iger withdi	rew/resig	ned or will	withdraw/resi	ign∘is: _	05/23	/202	<u>0.</u>
4. I, Dominic R. Febb	ame of Perso	n Resigning	<u> </u>	, hereby	withdraw/res	ign as a	ı		
Manager	(Print Title)		.						
of this limited liab resignation in wri		any and a	ffirm the	limited liab	ility_company	/ has be	en notifi	ed of	my
Signature of Di	ssociating	Member o	r Resign	ing Manage	r		SECRE TALL	2020 JL	" <b>7</b> 1
Filing Fee: Certified Copy:		 (Required (Optional) 	1				TARY OF STATE	JUL -2 AM 6: 48	
CR2E079 (2/14)									