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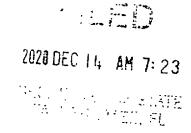
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COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	True Essence Tea Time Events,	LLC.	
		f Limited Liability Co	ompany)
The enclosed	d member, resignation or dis	ssociation and fee	(s) are submitted for filing.
Please return	n all correspondence concert	ning this matter to):
Lizette Joiner			
	(Contact Person)		
True Essence T	Tea Time Events, LLC.		
	(Firm/Company)		_
8451 Gate Parl	kwayXpt. #443		
	(Address)		_
Jacksonville, F	Norida 32216		
	(City/State and Zip Code)		
For further in	nformation concerning this i	matter, please call	:
Lizette B. Join	er	904 at (887-0951
(N	fame of Contact Person)	(Area Cod	le & Daytime Telephone Number)
Enclosed ple	ase find a check made paya	ble to the Florida	Department of State for:
■ \$25 Filing			ng Fee & Certified Copy
<u>M</u> ailir	ng Address:		Street Address:
	stration Section		Registration Section
	sion of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
Talla	hassee, 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)

	Elimited liability company as it appears on the records of the Florida Department Essence Tea Time Events, LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
Lizette B. Joiner	ember/manager withdrew/resigned or will withdraw/resign is:
(Print)	·
of this limited lic resignation in w	(Print Title) bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)