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(Requestor's Name)	
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(City/State/Zip/Phone #)	disso
(Business Entity Name)	10/15/2
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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A. RAMSEY NOV 17 2021

COVER LETTER

TO: Registration Section Division of Corporations

Sincerely Gaia LLC SUBJECT:

(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:

Pearlear Joseph

(Contact Person)

(Firm/Company)

7471 NW 36th ST

(Address)

Lauderhill, FL 33319

(City/State and Zip Code)

For further information concerning this matter, please call:

 Pearlear Joseph
 at (
 954
 648-5839

 (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 Certified Copy

Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303Tallahassee, FL 32303

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 28, 2021

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PEARLEAR JOSEPH 7471 NW 36TH ST. LAUDERHILL, FL 33319 US

SUBJECT: SINCERELY, GAIA LLC Ref. Number: L20000188803

We have received your document for SINCERELY, GAIA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form that you submitted is incorrect. It is for a limited partnership and your entity is a limited liability company. I have enclosed the correct form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey OPS

Letter Number: 221A00026249

www.sunbiz.org

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SERBETARY OF STATE ALL ARASSEE, FLOOR

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: _____
- 2. The Florida document/registration number assigned to this limited liability company is: L20000188803
- 3. The date this member/manager withdrew/resigned or will withdraw/resign is:
- 4. I. ______, hereby withdraw/resign as a ______, hereby withdraw/resign as a

Manager / Co-Owner

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee:\$25.00 (Required)Certified Copy:\$30.00 (Optional)