NZO 000276591	
(Requestor's Name) (Address) (Address)	300356205063
(City/State/Zip/Phone #)	12/10/2001007022 **25.00
(Business Entity Name) (Document Number)	S TALLENT JAN 2 6 2021
Certified Copies Certificates of Status Special Instructions to Filing Officer:	10 PH 2: 29
Office Use Only	Distema

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COVER LETTER

TO: Registration Section Division of Corporations

OUR DAILY BREAD SOUL SISTER LLC

(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:

Andrea Cesaire-Valery

(Contact Person)

OUR DAILY BREAD SOUL SISTER LLC

(Firm/Company)

6856 OLD WEST LN

(Address)

MILTON, FL 32570

(City/State and Zip Code)

For further information concerning this matter, please call:

Andrea Cesaire-Valery 350 281-2016 at (_____) (Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: \$\vee\$ \$25 Filing Fee & Certified Copy

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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 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: L20000226591

3. The date this member/manager withdrew/resigned or will withdraw/resign is: ______

Waltezhia Mack 4. I.

hereby withdraw/resign as a (Print Name of Person Resigning)

Authorized Representative

(Print Title)

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

Signature of Dissociating Member or Resigning Manager

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

2020 DEC 10 PH 2: 29