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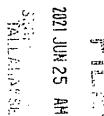
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## **COVER LETTER**

TO:	_	stration Section sion of Corporations				
	DIVIS	non of Corporations				
SUBJI	ECT:	BRAVURA SERVICES LLC				
2020		(Name of	1.imited	Liability (	Comp	pany)
The en	closec	I member, resignation or dis	sociatio	on and fe	e(s)	are submitted for filing.
Please	return	all correspondence concern	ing this	matter t	to:	
Jody Du	upont					
		(Contact Person)		· ···		
		(Firm/Company)				
2004 Q	uail Ric	ige Rd.				
		(Address)				
Anderso	on, SC	29625				
	•	(City/State and Zip Code)				
For fur	rther in	nformation concerning this n	natter, p	olease ca	ill:	
Jody Di	upont		at	864	,	353-0877
	(N	ame of Contact Person)			ode 8	A Daytime Telephone Number)
Enclos	ed ple	ase find a check made payat	ole to th	e Florida	a De	epartment of State for:
<b>\$25</b>	_					Fee & Certified Copy
	Mailir	ng Address:			٤	Street Address:
	Regis	stration Section				Registration Section
		ion of Corporations Box 6327				Division of Corporations  The Centre of Tallahassee
		hassee, FL 32314				The Centre of Tallanassee 2415 N. Monroe Street, Suite 810
	. una					Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER EROM 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: BRA	VURA SERVICES LLC	·		
2. The Florida docs	ument/registration number as:	signed to this limited liability company is:		
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resign is:		
4. I,   Jody Dupont   (Print Name of Person Resigning)		, hereby withdraw/resign as a		
Manager				
<del></del>	(Print Title)			
of this limited lia resignation in wr		e limited liability company has been notified of my		
	lody Digney			
Signature of Di	issociating Member or Resign	ning Manager		
	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			