L21000241198

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

_	stration Section ion of Corporations				
SUBJECT:	NEURO GRAPHIC DESIGN LLC			_	
(Name of Limited Liability Company)					
The enclosed	l member, resignation or disso	ociation and fee(s) are submitted for filing.		
Please return	all correspondence concernit	ng this matter to:			
LATANIA M I	RUISE				
	(Contact Person)			- 4	
RUISE & ASS	OCIATES PA			202 s i	
	(Firm/Company)		_		
1761 N YOUN	G CIRCLE STE 3 #110			- 1×2	
	(Address)		_	<u>ر</u> م	
HOLLYWOOI	O. FL 33020			5E	
	(City/State and Zip Code)		_		
For further in	iformation concerning this ma	atter, please call:			
LATANIA M F	RUISE	786 at (393-7750		
(Na	ame of Contact Person)	(Area Code	& Daytime Telephone Number)	•	
Enclosed plea ■ \$25 Filing	ase find a check made payable		Department of State for: g Fee & Certified Copy		
- Ψ23 1 time	, 1 00	باللهاء ووق ت	g ree a cermica copy		
Mailin	g Address:		Street Address:		
Registration Section		Registration Section			
<u>-</u>		Division of Corporations			
		The Centre of Tallahassee			
Tallal	nassee, 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)

	e limited liability company as it appears on the rec	ords of the Florida Department
of State is:	NO GRAI THE DESIGN FLC	
2. The Florida doc L21000291198	ument/registration number assigned to this limited	l liability company is:—
HIANA OPTA	ember/manager withdrew/resigned or will withdra, hereby withdra lame of Person Resigning)	-1-
(Frint I	MGRM	
	(Print Title)	
of this limited lia resignation in wr	bility company and affirm the limited liability coniting.	npany has been notified of my
_) uan	Osta	
Signature of Di	ssociating Member or Resigning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	