

L21 000 294979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

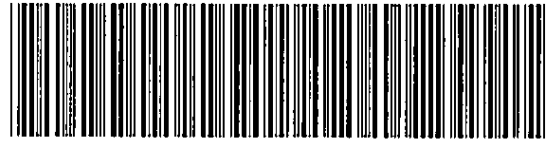
(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JADED MANGO 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:

Maria Garcia
(Contact Person)

Jaded Mango LLC
(Firm/Company)

624 NW 21st St
(Address)

Wilton Manors, FL 33311
(City/State and Zip Code)

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For further information concerning this matter, please call:

Maria Garcia at (954) 666-7696
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee \$55 Filing Fee & Certified Copy

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

