

121 000 326 594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

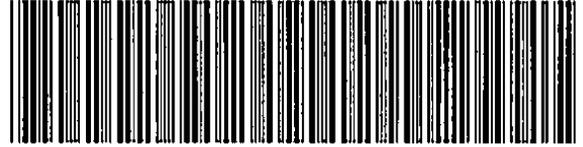
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500372325635

09/10/21--01025--011 *\$2.50

SEP 10 10 53 AM '21
TAX & REVENUE

2021 NOV 24 PM 2:24

FILED

C. BRUMBLEY
NOV 29 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cali and COCOA 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:

Amber Curry
(Contact Person)

(Firm/Company)

5810 N Daughtery Rd
(Address)

Lakeland FL 33809
(City/State and Zip Code)

For further information concerning this matter, please call:

Amber Curry at (954) 235 2292
(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



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: Caliana Cocoa LLC

2. The Florida document/registration number assigned to this limited liability company is:

500870121845

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/19/21

4. I, Tiana Sha Loo, hereby withdraw/resign as a
(Print Name of Person Resigning)

CO-Owner / Ambr.
(Print Title)

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

[Signature]

Signature of Dissociating Member or Resigning Manager

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

FILED
2021 NOV 24 PM 2:24
STATE OF FLORIDA
DIVISION OF CORPORATIONS