

## Florida Department of State

Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850)617-6383

## From:

Account Name : VAN WINKLE & SAMS, P.A.  
Account Number : 12003000032  
Phone : (941)923-1685  
Fax Number : (941)923-0174

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: yourlaworney@gmail.com**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
THE TWINSPA LLC**

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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: THE TWINSPA LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L22000021744
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/28/2022
4. I, Olya Gritsak, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Member and Authorized Member  
(Print Title)

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

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
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