

L 22 000 034 497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

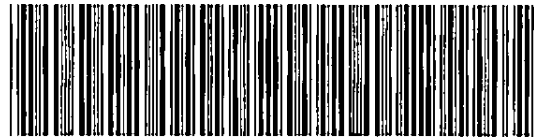
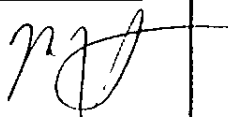
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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19-1-22--01005--020 **25.00

22 OCT 14 AM 5:05
DEPARTMENT OF REVENUE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Heart Your Slay 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:

Jamie Webb

(Contact Person)

(Firm/Company)

112 Lakeside Drive

(Address)

Oldsmar, FL 34677

(City/State and Zip Code)

For further information concerning this matter, please call:

Jamie Webb at (727) 519-4195

(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

22 OCT 14 AM 5:05
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



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: Hear Your Stay LLC

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

1.22000034497

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/18/2022

4. I, Rodrigo Yopez Jr., hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager

(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)

22 OCT 14 AM 5:05
DIVISION OF CORPORATIONS