## 124000311416

(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.		
Umils		





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2004 SEP 12 1:10:58

## COVER LETTER,

Division of Corporations		
Dorelle Pure Essence SUBJECT:		
	nited Liability	Company)
The enclosed member, resignation or dissoc	ciation and fo	ee(s) are submitted for filing.
Please return all correspondence concerning	this matter	to:
Doracruz Lejentus		
(Contact Person)		<del></del>
Dorelle Pure Essence		
(Firm/Company)		_ <del></del>
2915 Biscayne BLVD Suite 300		
(Address)		<del></del>
Miami FL, 33137		
(City/State and Zip Code)		<del></del>
For further information concerning this mat	ter, please ca	all:
Doracruz Lejentus	617 at (	7925998
(Name of Contact Person)	_ ` `	ode & Daytime Telephone Number)
Enclosed please find a check made payable	to the Florid	a Department of State for:
■ S25 Filing Fee	□ \$55 Fil	ling Fee & Certified Copy
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
1414140000, 1 10 52511		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)

	limited liability company as it appears le Pure Essence		a Department
2. The Florida doc	ument/registration number assigned to (	this limited liability company	y is:
L24000377476	ument/registration number assigned to (		र्वाप्तु .
3. The date this me	mber/manager withdrew/resigned or w	ill withdraw/resign is:	2024~
4. I, Terrance Tyrrell (Print N	mber/manager withdrew/resigned or w Turner, here tame of Person Resigning)	by withdraw/resign as a	
Manager			3
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm the limited liting.	iability company has been no	otified of my
Tarran	Sociating Member or Resigning Mana		
Signature of D	ssociating Member or Resigning Mana	ger	
	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		