(Requestor's Name) (Address) 100055901451 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies __ Certificates of Status Special Instructions to Filing Officer:

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M. HODGES

06/17/05--01006--015 **30.00

TRANSMITTAL LETTER

| TO: Registration So Division of Co | | | |
|---------------------------------------|--|---|---|
| SUBJECT: Yoga 101 | LLC (Name of L | imited Liability Company) | |
| | | | |
| The enclosed Articles o | f Dissolution and fee(s) are sub | mitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | | | |
| Re | obert Millstein | | |
| | | (Name of Person) | |
| | | | |
| | | (Firm/Company) | |
| 1821 1 | lorth Market Street | | |
| | | (Address) | |
| .lark | sonville, FL 32206 | | |
| <u> </u> | | y/State and Zip Code) | ······································ |
| | | | |
| For further information | concerning this matter, please of | rali | |
| Tot talque information | concerning and mater, presse t | 74311 | |
| Robert Milistein | | at (904) 359-960 | |
| | (Name of Person) | (Area Code & Daytime | Telephone Number) |
| Enclosed is a check for th | e following amount: | | |
| ☐ \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Carres | FFT ANNDESS. | MAITING ADDD | rae. |
| STREET ADDRESS: Registration Section | | MAILING ADDRESS: Registration Section | |
| Division of Corporations | | Division of Corporations P.O. Box 6327 | |
| 409 E. Gaines Street | | Tallahassee Florida 32314 | |



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 22, 2005

ROBERT MILLSTEIN 1821 NORTH MARKET STREET JACKSONVILLE, FL 32206

SUBJECT: YOGA 101, LLC Ref. Number: M02000002676

We have received your document for YOGA 101, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to withdraw this foreign Limited Liability Company from Florida, the form submitted is to dissolve a Florida company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 705A00042711

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

| VOGA 101 LLC |
|---|
| (Name of limited liability company) |
| DECAWARE |
| (Jurisdiction of its organization) |
| This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state. |
| This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida. |
| 1821 Novay MARGET SUEET (Mailing address) |
| JACKSONVILLE, EL 32206 (City/State/Zip) |
| The limited liability company agrees to notify the Department of State in the future of any change in its mailing address. |
| (Signature of member or authorized representative of a member) |
| KOBERT MICHSTEIN |
| (Typed or printed name of signee) |
| - 05 |

Filing Fee: \$25.00