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(Re	equ <b>estor's Name</b>	)
(Ac	idress)	
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(Ci	ty/State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Na	ame)
(Do	ocument Number	7)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Andara Smile Spa, LLC (Name of Limited Liability Company)	2000 10 10 10 10 10 10 10 10 10 10 10 10
The enclosed Articles of Dissolution and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Ronald E. Goldstei	N
Clo Andara Smile Spa (Firm/Company)	,
5135 Marbury Circle,	N.W.
Atlanta, GA 3032	7
(City/State and Zip Code)	<del></del>
For further information concerning this matter, please call:	
Ronald Goldstein at 404, 255  (Name of Person) (Area Code & Daytime 7)	-8639
(Name of Person) (Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
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

Andara Smile Spa LLC (Name of limited liability company)		
(Name of limited liability company)		
Florida.		
(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.		
5135 Marbury Cicle N.W.		
(Mailing address)		
Aflanta, GA 30327 (City/State/Zip)		
(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)		
Ronald & Goldstein		
(Typed or printed name of signee)		