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T. LEMIEUX

## **COVER LETTER**

	stration Section sion of Corporations		
SUBJECT:	CHICKEN EXPERTS, LLC		
	(Name of Lim	ited Liability Co	mpany)
The enclosed	1 member, resignation or dissoci	ation and fee(	s) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
CHRISTINA	A QUINTANA		
	(Contact Person)		<del></del>
QUINTANA	& ASSOCIATES, P.A.		
	(Firm/Company)		_
1805 PONC	DE DE LEON BLVD., SUITE 2	200	
	(Address)	,	_
CORAL GA	BLES, FL 33134		
	(City/State and Zip Code)		_
For further in	nformation concerning this matte	r, please call:	
CHRISTINA	A QUINTANA	305	446-0300
(N:	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed ple \$25 Filing	ase find a check made payable to Fee		Department of State for: g Fee & Certified Copy
Registration of C Division of C Clifton Build 2661 Executi	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



## 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 Florid	da Depar	tment	
of State is:	CKEN EXPERTS, LLC			<del></del> .	
2. The Florida docu L1300004878		signed to this limited liability compa	ny is:		
3. The date this me	mber/manager withdrew/resig	gned or will withdraw/resign is: 12/	12/14		
4. I, JOSE FERN	ANDO FERNANDES	, hereby withdraw/resign as a			
(Print N	ame of Person Resigning)	, hereby withdraw/resign as a			
MEMBER AN	DTREASURER	,			
-	(Print Title)				
of this limited lial resignation in wr		e limited liability company has been r	notified o	f my	
See			TAL	74	
Signature of Di	ssociating Member or Resign	ning Manager	CRET	14 DEC 22	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		ARY OF STAI	22 AH 3:5	FILED