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COVER LETTER

Division of Corporations Motor City Sports Bar LLC SUBJECT: (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: Mark Irizarry (Contact Person) (Firm/Company) 2104 engessor rd (Address) Zephyrhills, FL 33540 (City/State and Zip Code) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) Mark Irizarry (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

Registration Section



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)

	or City Sports Bar LLC	s it appears on the records of the Florida Department
2. The Florida doc	ument/registration number a	ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/re	signed or will withdraw/resign is: 6/4/21
Christian Figueroa 4. I,		hereby withdraw/resign as a
(Print)	Name of Person Resigning)	, hereby withdraw/resign as a
CEO		
	(Print Title)	
resignation in wa		he limited liability company has been notified of my Gring Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	