Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : TAX, ACCOUNTING AND FINANCIAL EXPERTS, INC.

Account Number : 120120000058 Phone : (305)438-767

Phone : (305)438-7671 Fax Number : (866)895-8710

Enter the email address for this business entity to be used for future _annual report mailings. Enter only one email address please.

Email Address:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BEREISHIT CATERERS, L.L.C.

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4/8/2016

04/08/16 05:31PM EDT Right Way Multiservices Corp \rightarrow 6383 Pg 2/2





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)

	the limited liability company EREISHIT CATERERS, LL	as it appears on the records of the Florida Department
2. The Florida do L020000253	•	assigned to this limited liability company is:
3. The date this	member/manager withdrew/r	resigned or will withdraw/resign is: 4/8/2016
		, hereby withdraw/resign as a
(Prin	it Name of Person Resigning)	, , , , , , , , , , , , , , , , , , , ,
MGRM		
	(Print Title)	·
of this limited resignation in	, ,	the limited liability company has been notified of my
<u></u>	- popular	
Signature of	Dissociating Member or Res	signing Manager
Filing Fee:	\$25.00 (Required)	

CR2E079 (2/14)

Certified Copy:

\$30.00 (Optional)