104000047491

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Olly Olater Ziph Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Dodamon, Varinos)
Certified Copies Certificates of Status
•
Special Instructions to Filing Officer:
,
<u> </u>

Office Use Only



800061270078

11/28/05--01015--001 **50.00



COVER LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: Diversity Company) (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Eva Bassoum, Esq. (Name of Person) Eva Bassoum, Esq. Eva Bassoum, E		
(Name of Person) (Firm/Company) (Firm/Company) (Firm/Company)		
P. O- Box 6696 (Address)		
De Stin FL 32550 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Sva Basson Sss. at (850) 650-4718 (Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Z661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
☐\$25 Filing Fee ∠ 2 50 ☐\$55 Filing Fee & Certified Copy		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

1, Cinply Stuart, hereby resign as	Managing Member
of Diversity Cafe LLC (Limited Liability Company)	
a limited liability company organized under the laws of the State of	Florida
and affirm that the limited liability company has been notified in writing	ng of the resignation.
(Signature of resigning manager, managing member of	or member)
•	LAHA

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Talkabassee, FL 32314