## LD600021096

(R	equestor's Name)			
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(A	ddress)			
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(C	ity/State/Zip/Phone #	,		
PICK-UP	☐ WAIT	MAIL		
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(Bi	usiness Entity Name)			
(Do	ocument Number)			
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
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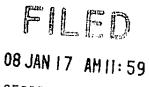


## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Vinnie's Restaurant & Lounge, LLC (Name of Limited Liability Company)				
The enclosed member, managing member or manager resignating.	ation and fee(s) are submitted for			
Please return all correspondence concerning this matter to:				
Nancy J. Chamides, Esq.				
(Contact Person)				
Gottlieb & Gottlieb, Attorneys At Law, P.A.				
(Firm/Company)				
125 North 46th Avenue				
(Address)				
Hollywood, FL 33021				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
	966-7900			
(Name of Contact Person) (Area Code &	2 Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for:				
X \$25 Filing Fee \$5	5 Filing Fee &			
<del></del>	Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
	Registration Section			
	Division of Corporations			
<u> </u>	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Fallahassee, Florida 32314			
rananassee, riorida 52501				

CR2E079 (5/06)





SECRETARY OF STATE TALLAHASSEE FLORIDA

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as nnie's Restaurant & Lou		of the Florida Department
2. This limited liab Florida	ility company was organized	under the laws of:	
3. The Florida docu <u>L06000021</u>	ument/registration number of	this limited liability com	pany is:
of this limited lia resignation in wr	lame of Person Resigning) bility company and affirm the		(Print Title)
~	\$25.00 (Required) \$30.00 (Optional)		