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To: Division of Corporations Fax Number : (850)617-6383

From:

Account Name : W. GREGORY GOLSON, P.A. Account Number : 120070000129 Phone : (B13)241-0900 Fax Number : (B13)241-0910

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STREETCAR CHARLIE'S, LLC

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(FAX)13053799626

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COVER LETTER

TO: **Registration Section**

Division of Corporations

SUBJECT: STREETCAR CHARLIE'S, LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

W. Gregory Golson, Esquire

(Contact Person)

Golson Legal, P.A.

(Firm/Company)

1724 E. 5th Avenue

(Address)

Tampa, Florida 33605

(City/State and Zip Code)

For further information concerning this matter, please call:

W. Gregory	Gols	SO	'n		at (8	13	_)	24	1-0)90)
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(Name of Contact Person)

0

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$55 Filing Fee & Ccrtified Copy

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: STREETCAR CHARLIE'S, LLC

r	This limited linkility	i componyi itio	havingto a	under the	Inve of
	Florida				

- 3. The Florida document/registration number of this limited liability company is: L08000003882
- A T Manuel Alvarez

(Print Name of Person Resigning)

, hereby resign as a Manager (Print Title) AM 8:

ω

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)

CR2E079 (5/06)