L08000040802

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entrty Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	_
Special instructions to Filing Officer.	
•	

Office Use Only



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08/17/09--01008--002 **25.00

09 AUG | 7 PH |2: 57

J. BRYAN

AUG 18 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		, ; *		
SUBJECT: HOLLYWOOD RESTAURANT A				
The enclosed member, managing member or manager res filing.	gnation and fee(s) are sub	mitted	for	
Please return all correspondence concerning this matter to	:			
NIKOLETTA GONZALEZ				
(Contact Person)				
HOLLYWOOD RESTAURANT AND DELI (Firm/Company)	LLC.			
1231 AVONDALE LANE	<u> </u>	SECR	09 AI	-
(Address)		ETAI	AUG 17	
WEST PALM BEACH, FLORIDA 33409		SEE SEE	7 6	1
(City/State and Zip Code)	_			
For further information concerning this matter, please cal	:	TATE ORIDA	PH 12: 57	
NIKOLETTA GONZALEZ at (561	₎ 809-1153			
	e & Daytime Telephone Nu	mber)		
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS	:		
Registration Section	Registration Section			
Division of Corporations	Division of Corporation	IS		
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 323	314		

CR2E079 (5/06)



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 ap	pears on the records	of the Flori	ida Dep	artme	nt
of State is: Hol	lywood Restaurant and D	Deli LLC.		SE	2	
	ility company was organized under			CRETARY OF S LAHASSEE, FI	AUG 17	FILED
3. The Florida docu L08000040	ment/registration number of this 0802	limited liability con	npany is:	STATE FLORIDA	PM 12: 57	O
4. I. Felipe Ner	i Gonzalez	, hereby resign as a	managing	mem	ber (MGMR)
(Print Name of Person Resigning)		(Print Title)				-
resignation in wr	pility company and affirm the limiting. Solution of the limiting of the limit		ny has been	notified	d of m	ny
Filing Fee:	\$25.00 (Required) \$30.00 (Ontional)					

CR2E079 (5/06)