

**L08000042911**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

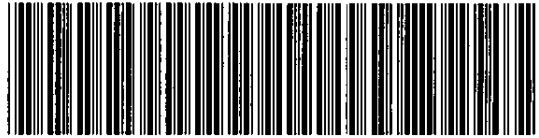
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000144816590

03/05/09--01007--022 \*\*55.00

FILED  
09 MAR - 5 AM 10:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. THOMAS  
MAR - 6 2009  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Black Diamond Full Service Catering 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:

Christopher Wilson

(Contact Person)

Black Diamond Full Service Catering LLC

(Firm/Company)

739 Washington St.

(Address)

Daytona Beach FL. 32114

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Wilson

(Name of Contact Person)

at ( 386 ) 871-0818

(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 &  
Certified Copy

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
09 MAR -5 AM 10:58  
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**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Black Diamond Full Service Catering LLC

2. This limited liability company was organized under the laws of:  
The State of Florida

3. The Florida document/registration number of this limited liability company is:  
L08000042911

09 MAR -5 AM 10:58  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4. I, Keith L. Walker, hereby resign as a Managing Member  
(Print Name of Person Resigning) (Print Title)

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

Chef Keith L. Walker

Signature of Resigning Member, Managing Member or Manager

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