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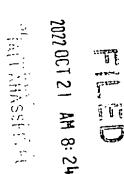
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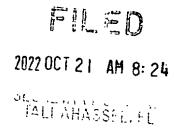
COVER LETTER

Division of Corporations Additives Supplements & Grains, LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: **Emilio Morales** (Contact Person) Addatives Supplements & Grains, LLC (Firm/Company) 10501 SW 155th Ct, Suite 1128 (Address) Miami FL 33196 (City/State and Zip Code) For further information concerning this matter, please call: **Emilio Morales** (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

Registration Section





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	The name of the limited liability company as it appears on the records of the Florida Department of State is: Florida Additives Supplements & Grains, LLC.
2.	The Florida document/registration number assigned to this limited liability company is: L09000032353
3. 4.	The date this member/manager withdrew/resigned or will withdraw/resign is: 9/30/2022 I, Henry De Jesus Gonzalez, hereby withdraw/resign as a
	(Print Name of Person Resigning) Manager (Print Title)
	of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. Signature of Dissociating Member or Resigning Manager
	ling Fee: \$25.00 (Required) extified Conv. \$30.00 (Optional)