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## LD9000 101121

| (Re                                     | equestor's Name)  |             |  |
|---|-------------------|-------------|--|
| (Ac                                     | ldress)           |             |  |
| (Ac                                     | ldress)           |             |  |
| (Ci                                     | ty/State/Zip/Phon | e #)        |  |
| PICK-UP                                 | ☐ WAIT            | MAIL        |  |
| (Business Entity Name)                  |                   |             |  |
| (Document Number)                       |                   |             |  |
| Certified Copies                        | _ Certificate:    | s of Status |  |
| Special Instructions to Filing Officer: |                   |             |  |
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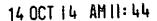
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

0CT 2 9 2014 T. CARTER

LLC MINGR Resign







## 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)

|                    | • •                           | it appears on the records of the Florida Department |
|--------------------|-------------------------------|---|
| of State is:       | tude Foods, LLC               |   |
| 2. The Florida doc | ument/registration number ass | signed to this limited liability company is:        |
| L0900010112        | .1                            | ·   |
|                    |                               | gned or will withdraw/resign is:                    |
| 4. I, Luis J. Dage | er                            | , hereby withdraw/resign as a                       |
|                    | Name of Person Resigning)     |   |
| MGRM               |                               | -   |
|                    | (Print Title)                 |   |
| resignation in w   | riting.                       | e limited liability company has been notified of my |
| Signature of D     | issociating Member of Resign  | ning Manager  |
|                    | / *                           |   |
| Filing Fee:        | \$25.00 (Required)            |   |
| Certified Copy:    | \$30.00 (Optional)            |   |