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COVER LETTER

TO: Registration Section Division of Corporations	
Hamburger, LLC SUBJECT:	
(Name of Li	imited Liability Company)
The enclosed member, resignation or disso	ociation and fee(s) are submitted for filing.
Please return all correspondence concerning	ig this matter to:
Elliot Borkson, Esq.	
(Contact Person)	***
Elliot Borkson, PA	
(Firm Company)	
1313 South Andrews Avenue	
(Address)	
Fort Landerdale, FL 33316	
(City State and Zip Code)	
For further information concerning this ma	atter, please call:
Elliot Borkson	954 462-6360 3t ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	e to the Florida Department of State for: Ll \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address: D suitterfor Section
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

FILED

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TALLAHASSEE, FLORIDA

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of of State is:	the limited liability company as it appears on the records of the Florida Department amburger, LLC
	ocument/registration number assigned to this limited liability company is:
3. The date this	member/manager withdrew/resigned or will withdraw/resign is:
4. I. Pamela Berry	, hereby withdraw/resign as a was a was not some of Person Resigning)
Manager	
4-914-i	(Print Title)
resignation in	liability company and affirm the limited liability company has been notified of my writing. Dissociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)

Certified Copy: \$30.00 (Optional)