L10000083813

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COVER LETTER

TO:	Registration Section Division of Corporations				
es ED	SUSHI PRIME, L.L.C.				
SUR	IECT: (Name of Limit	ed Liability Co	impany)		
The c	nclosed member, resignation or dissocia	ition and fee	(s) are submitted for filing.		
Plcas	e return all correspondence concerning t	his matter to	:		
SCOT	T J. WEISELBERG	<u>,,</u>			
	(Contact Person)				
корт	ELOWITZ OSTROW, PA				
	(Firm/Company)				
I WE	ST LAS OLAS BLVD, SUITE 500			23	<u> </u>
	(Address)			83,	N N
FOR	LAUDERDALE, FL 33301			21	07 CO
	(City/State and Zip Code)			AH	주요: 요
For	urther information concerning this matte	er, please cal	l:	6: 53	AAII ON
sco ^r	rt J. Weiselberg	954 ut (525-4100		
4	(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)		
	osed please find a check made payable to 25 Filing Fee	o the Florida	Department of State for: ng Fee & Certified Copy		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassec 2415 N. Monroe Street, Suite Tallahassec, FL 32303	810	

CR2E079 (2/14)



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)

	limited liability company as it PRIME, L.L.C.	t appears on the records of the Florida (Department
2. The Florida doc L10000083813	ument/registration number assi	igned to this limited liability company i	is:
		ned or will withdraw/resign is: 10/15/22	
MANAGER	(Print Title)		
	bility company and affirm the	limited liability company has been noti	fied of my
Filing Fee:	ssociating Member or Resigni \$25.00 (Required) \$30.00 (Optional)	ng Manager	23 FEB 21