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COVER LETTER

TO: Registration Section **Division of Corporations**

lates L.L.C.

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Vito Celano (Contact Person)
Vitos Pizza & Peota
(Firm/Company)
3120 Leeshore 100P
(Address)
Crity/State and Zip Code)

For further information concerning this matter, please call:

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee &

□ \$25 Filing Fee

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Certified Copy

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

CR2E079 (12/13)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it appears on the cos Pizze & Puok of Wo			و
Flordi	nent/registration number of this limited liabil CLL100079310 ber withdrew or will withdraw is: 12-14			
	Re of Person Resigning), hereby resigner	gn as a MGZW (Print Title	2)	
of this limited liabil resignation in writing	lity company and affirm the limited liability ng.	company has been notif	ned of my	
Oarlo	sknes	Ç. Ale	14	
Signature of Resi	gning or Dissociating Manager, Member	, AHASSE	3/1H-2	- 1 - 1 - 2 - 2 - 2 - 2
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	P. PLORIDA		ing at