

L11000095388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

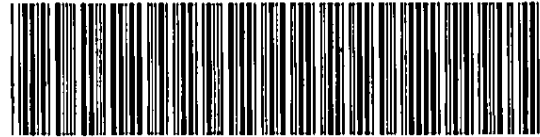
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/19/18--01014--024 **55.00

FILED

18 SEP 19 AM 10:11

CLERK OF SUPERIOR COURT
JANET L. BROWN, CLERK
1000 E. MAIN ST., 10TH FLOOR
DENVER, CO 80202

G. SIMMONS
SEP 20 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MC HOSPITALITY LLC

(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:

Michael R. Naimy, Esq.

(Contact Person)

Beighley, Myrick, Udell & Lynne P.A.

(Firm/Company)

2385 NW Executive Center Dr., Suite 250

(Address)

Boca Raton, FL 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael R. Naimy, Esq.

at (561) 549-9036

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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



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)

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SEP 19 AM 10:11
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: MC HOSPITALITY LLC
 2. The Florida document/registration number assigned to this limited liability company is:
L11000095388
 3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/18/2018
 4. I, BELLA CHEF LLC, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGRM
(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

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)