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(Re	equestor's Name)					
(Ad	ddress)					
· (Ac	ddress)					
(C)	ity/State/Zip/Phone #	f)				
PICK-UP	☐ WAIT	MAIL				
(Bi	usiness Entity Name	e)				
(Document Number)						
Certified Copies	Certificates c	of Status				
Special Instructions to Filing Officer:						

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: The Hangout Frozen Yogurt Cafe, LLC.

(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

Vickie Viscarra

(Contact Person)

The Hangout Frozen Yogurt Cafe, LLC.

(Firm/Company)

3174-A South Atlantic Avenue

(Address)

Daytona Beach Shores, FL 32118

(City/State and Zip Code)

For further information concerning this matter, please call:

Vickie VIscarra

, 38b

566-7416

(Name of Contact Person) (Area

(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

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability comp					Depa	ırtment
of State is:	The Hangout	Frozen	Yogust	Cafe, L	rc.		·
2. This limited liab	ility company was or Florida	ganized unde	er the laws o	f:	SLUGETARY TALLAHASSE	2013 NOV 22	
	ment/registration num	mber of this	limited liabi	lity company	r is: الله الله الله الله الله الله الله الل	PH	
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4. I,J	onathan Visco	arra	, hereby resi	gn as a	MGI	m	
	ame of Person Resigning		•	_	(Print T	itle)	
of this limited lial resignation in wr	_		·		s been no	tified	of my
	Jonathan 1	Lacarr	a				
Signature of Resi	gning Member, Mana	aging Memb	er or Manag	er			
Filing Fee:	\$25.00 (Required)					
•	\$30.00 (Optional)	•					