412000/26630

(F	Requestor's Name)			
(4	\ddress)			
(/	\ddress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
	Business Entity Name	<u>,, </u>		
(1	ousiness Entity Name	7)		
(E	Document Number)			
Certified Copies	Certificates o	of Status		
	· · · · · · · · · · · · · · · · · · ·			
Special Instructions to Filing Officer:				
JAN 3 1 2016				
A. LUNT				
	<u></u>			

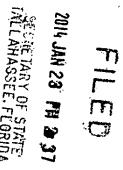
و،

Office Use Only



900252864299

01/23/14--01024--004 **25.00



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 2 dudes foods (Name of Limited Liability C	Company)	
The enclosed member, resignation or dissociation and fee	e(s) are submitted for filing.	
Please return all correspondence concerning this matter to	0:	
Michael Kanc (Contact Person)		
adudes Foods (Firm/Company)		
2875 Sunset Rd.		70
Melbourne of 3290c (City/State and Zip Code)	LAHASS	14 JAH 28
For further information concerning this matter, please cal	II:	
Michael Kane at (32-1) (Name of Contact Person) (Area Co	de & Daytime Telephone Number)	37
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: 1 \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
200. Brought Come Choice	1 411411411141 5 2 5 1 1	

CR2E079 (12/13)

Tallahassee, Florida 32301



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 records of the Flo	rid <u>a</u> Dep	artment
of State is:	2 dudes foods wc		
		A.A.	JAN 28
a m	de la companya del companya de la companya del companya de la comp	ASS.	22
	nent/registration number of this limited liability company is:	m~	ب
<u>L1200</u>	012 6630		
		93 1.5	6-2
3. The date this mem	ber withdrew or will withdraw is:	(書)	29
1	• • • • • • • • • • • • • • • • • • • •	£-	
4. I, March	A. Price hereby resign as a Ma	naa	ec
(Print Nan	ne of Person Resigning) (Pr	int Title)	
of this limited liabil	lity company and affirm the limited liability company has been	n notified	d of my
resignation in writi	ng.		
1 /			
TWEN	UML_		
Signature of Resi	gning or Dissociating Manager, Member		
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		