## 4/3000009701

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
•						
EER () // 56+5)						
FEB 2 0 2018)						
A. LUNT						

Office Use Only



300244496933

02/18/13--01014--020 \*\*25.00

2013 FEB 18 PH 2016

## **COVER LETTER**

SUBJECT: A-Flame Charburger, 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:  Elias Papadeas  (Contact Person)  A-Flame Charburger, LLC  (Firm/Company)  9 Warren Place  (Address)  Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (Name of Contact Person)  Enclosed please find a check made payable to the Florida Department of State for:  \$\begin{align*}	_	tion Section of Corporations			
Flias Papadeas  (Contact Person)  A-Flame Charburger, LLC  (Firm/Company)  9 Warren Place  (Address)  Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (Name of Contact Person)  Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee  Certified Copy	SUBJECT: A-			<del>· · · · · · · · · · · · · · · · · · · </del>	
Elias Papadeas  (Contact Person)  A-Flame Charburger, LLC  (Firm/Company)  9 Warren Place  (Address)  Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (Name of Contact Person)  Enclosed please find a check made payable to the Florida Department of State for:  \$\Begin{array} 386 \ 334-2300 \\ (Area Code & Daytime Telephone Number)  Enclosed please find a check made payable to the Florida Department of State for:  \$\Begin{array} 555 Filing Fee & Certified Copy  \$\Begin{array} 5		ember, managing member	or manager resig	gnation and fee(s) are subn	nitted for
A-Flame Charburger, LLC  (Firm/Company)  9 Warren Place  (Address)  Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (Name of Contact Person)  Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee  \$25 Filing Fee & Certified Copy	Please return all o	correspondence concernin	g this matter to:		
A-Flame Charburger, LLC  (Firm/Company)  9 Warren Place  (Address)  Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (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 & Certified Copy	Elias Pap	padeas			
9 Warren Place  (Address)  Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas (Name of Contact Person)  (Area Code & Daytime Telephone Number)  Enclosed please find a check made payable to the Florida Department of State for:  \$\Begin{align*}		(Contact Person)		<del></del>	
9 Warren Place  (Address)  Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas (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 Certified Copy	A-Flame	Charburger, L	LC	_	
Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (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 \$  Certified Copy		(Firm/Company)			(C)
Palm Coast, FL 32164  (City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (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 Certified Copy	9 Warren	n Place			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(City/State and Zip Code)  For further information concerning this matter, please call:  Elias Papadeas  (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 Certified Copy	•	(Address)		_	
For further information concerning this matter, please call:  Elias Papadeas  (Name of Contact Person)  At (Area Code & Daytime Telephone Number)  Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee Certified Copy	Palm Coa	ast, FL 32164			
Elias Papadeas (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  Certified Copy		(City/State and Zip Code)			
Enclosed please find a check made payable to the Florida Department of State for:  \$\Bigs \text{\$\frac{1}{2}\$} \te	For further inform	mation concerning this ma	ntter, please call:		
Enclosed please find a check made payable to the Florida Department of State for:  \$\Bigs \text{\$\frac{1}{2}\$} \te	Elias Pap	padeas	at ( 386	,334-2300	
■ \$25 Filing Fee & Certified Copy	(Name	of Contact Person)	(Area Code	& Daytime Telephone Nun	nber)
Certified Copy	•			-	
STREET/COURIER ADDRESS: MAILING ADDRESS:	•	323 rining rec	<b>.</b>	_	
				· · · - · · - · · - · · · · · ·	
Registration Section Registration Section	•				
Division of Corporations  Division of Corporations	-				i
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314					1.4

Tallahassee, Florida 32301

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it a of State is: A-Flame Charburger, LLC	ppears on the records of the Flor	rida Dep ———	oartmer	. <b>.</b>
This limited liability company was organized under Florida	der the laws of: 	THE SECOND	2013FE	ادي ود د د د د د د د د د د د د د د د د د د
3. The Florida document/registration number of this limited liability company is:			8 PH 3	grann
<sub>4. I.</sub> Angela Sabato	, hereby resign as a MGRM	写表 r - <b>1</b>	•	
(Print Name of Person Resigning) (Print Title				
of this limited liability company and affirm the lir resignation in writing.  Signature of Resigning Member, Managing Mem		ı notifie	d of my	y.
Filing Fee: \$25.00 (Required)				

Certified Copy:

\$30.00 (Optional)