

L13000048294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

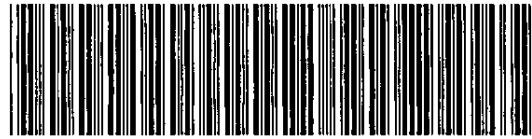
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400251440374

09/17/13--01015--021 **75.00

FILED
2013 SEP 17 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 18 2013

T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAMA MIA PIZZERIA & LATINO RESTAURANT LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LIZETTE CARTAGENA

Name of Person

JTSM FINANCIAL SERVICES

Firm/Company

175 GRACE BLVD

Address

ALTAMONTE SPRINGS, FL 32714

City/State and Zip Code

JTSM_JTSM@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LIZETTE CARTAGENA at (407) 600-0597

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

2013 SEP 17 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



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 appears on the records of the Florida Department of State is: MAMA MIA PIZZERIA & LATINO RESTAURANT LLC

2. This limited liability company was organized under the laws of:
STATE OF FLORIDA

3. The Florida document/registration number of this limited liability company is:
L13000048294

4. I, RICARDO FERNANDEZ, hereby resign as a MGRM
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

FILED
2010 SEP 17 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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