

L130000581838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

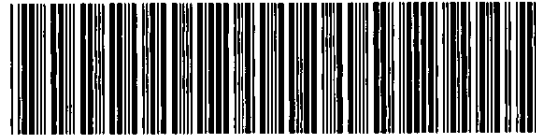
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/09/14--01001--025 **55.00

LC
Disinbrmpa

OCT 9 2014

R. WHITE

RECEIVED
DEPARTMENT OF STATE
14 OCT - 8 4:42

FILED
14 OCT - 8 AM 9:11
DEPARTMENT OF STATE
TREASURER, FLORIDA



October 8, 2014

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 9304871 SO
Customer Reference 1: None Given
Customer Reference 2: None Given

Dear Department of State, Florida :

Please obtain the following:

MO'S CAKES, LLC (FL)
Misc - Domestic LLC Filing - Dissociation or Resignation of
Member, Manager
Florida

MO'S CAKES, LLC (FL)
Obtain Document - Misc - Certified Copy of Dissociation or
Resignation
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
14 OCT -8 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: MO'S CAKES, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L13000084838

3. The date this member/manager withdrew/resigned or will withdraw/resign is: September 22, 2014
~~May 22, 2014~~

4. I, MARIOLGA CALDERON, hereby withdraw/resign as a
(Print Name of Person Resigning)

MANAGER/MEMBER
(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)