1300012701

(Re	questor's Name)	
. (Ad	idress)	_
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
	ocument Number)	
(DC	cument Number)	
Certified Copies	_ Certificates	s of Status
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ARASSEE, FL

SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MIKING SISML (Name of Limited Lia)	bility Company)
The enclosed member, resignation or dissociation a	nd fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to:
LISA CONJUNNASING	
ROCKING CUSHI (Firm/Company)	
1940 Fairly Lakes Dr Sle 3	
FUA MYLIS FL 33913 (City/State and Zip Code)	
For further information concerning this matter, plea	se call:
LISA SOL Dorn Oling at (& ()	239 <u>849- 3118</u> rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the F ☐ \$25 Filing Fee ☐ \$5	lorida Department of State for: 5 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)



October 26, 2018

Lisa Souvannasing Rocking Sushi L.L.C. 11940 Fairway Lake Dr., Suite 3 Ft. Myers, FL 33913

SUBJECT: ROCKING SUSHI L.L.C.

Ref. Number: L13000129701

We have received your document for ROCKING SUSHI L.L.C. and your check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Steven Glozik is listed only as an authorized member. A resignation of an authroized member needs to be sumbitted on the enclosed form.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Letter Number: 218A00022085

Lyn Shoffstall Bureau Chief

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

FILED 2018 NOV 19 AM 8: 02 SECRETARY OF STATE TALLAHASSEE, FL

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:	Accring Susni
2. The Florida doci	ument/registration number assigned to this limited liability company is:
<u> </u>	10502
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 10 21 18
4. I. Steven G	, hereby withdraw/resign as a lame of Person Resigning)
	MEMPLY (Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
\mathcal{A}	11.1-
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)