L17000169026

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(80	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





800256048128

01/31/14--01005--011 **25.00

J. Statvers FEB 0 4 2013



COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: C+T Breakfast + Lunch LLC Name of Limited Liability Company DOCUMENT NUMBER: L 1300016 9026				
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Cinby Sum lin Name of Person				
C+T Breakfast & Lunch Name of Firm/Company				
412 EAST Ocean Awe # 2				
Boynton Beach, FL 33435 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Cindy Sumlin at (561) 876-5172 Name of Person Area Code Daytime Telephone Number				
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.				

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

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

INHS17 (12/13)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		as it appears on the records of the	e Florida Department
	ment/registration number	of this limited liability company	is:
3. The date this men	nber withdrew or will wit	thedraw is: <u>January</u>	24,2014
4. I, Thomas (Print Na	W JOACS me of Person Resigning)	, hereby resign as a MNO	(Print Tile)
of this limited liab resignation in writ		the limited liability company has	been notified of my
Signature of Res	igning or Dissociating N	Manager, Member	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	Sworward before me	Subserbed Jan Jan 34, Jan 2014
		Afford of the second	10
CR2E079 (12/13)		LUT CHANGE DOWN OF THE LUT OF THE	1005