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EXAMINER

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COVER LETTER

Division of Corporations EL SOMBRERO MEXICAN CUISINE, LLC. (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: JOHN HOLDER (Contact Person) EXECUTIVE MANAGEMENT AND CONSULTANTS INTERNATIONAL, LLC (Firm/Company) 777 NW 51ST STREET SUITE 116 (Address) BOCA RATON, FL 33431 (City/State and Zip Code) For further information concerning this matter, please call: JOHN HOLDER (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 □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

CR2E079 (2/14)

Tallahassee, Florida 32301

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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 Depar	rtment
of State is: EL S	SOMBRERO MEXICAN	CUISINE, LLC.	
2. The Florida doc	•	assigned to this limited liability company is:	
3. The date this me	ember/manager withdrew/re	esigned or will withdraw/resign is:	
4. I, HECTOR V	ELAZQUEZ	, hereby withdraw/resign as a	
(Print N	lame of Person Resigning)		
MGR			
	(Print Title)		
of this limited lia resignation in wr		the limited liability company has been notified of	of my
			23
7/. 1.	1/./		
MECLET	[lulyquoy		. ۔ . ،
Signature of D	issociating Member or Res.	igning Manager	25
_			#: ID: #
_	\$25.00 (Required)	•	<u> </u>
Certified Copy:	\$30.00 (Optional)	2*	₽-