

L14000065650

(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



100259794351

05/07/14--01003--007 \*\*80.00

05/07/14 10:10  
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05/07/14 10:10

B. BOSTICK

MAY 14 2014

EXAMINER



**SUNSTATE**

Accounting & Tax Services

May 2, 2014

Florida Department of Revenue  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

Dear Department:

The check enclosed, #1079, made payable to you for the amount of \$80.00 is for the 3 enclosures.

- |  |         |
|--|---------|
| 1. Articles of Amendment for L14000065650                | \$30.00 |
| 2. Resignation of Member for L14000065650                | 25.00   |
| 3. 2 <sup>nd</sup> Resignation of Member for L1400065650 | 25.00   |

We appreciate your expediency of these enclosed documents as Mr. Rivas wishes to open this business as soon as possible.

Sincerely,

Patricia Cramer  
Accountant

2014 MAY 13 PM 1:00  
0014 0112-00102-01102

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Brother's Food Mart 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:

Asif S Khan

(Contact Person)

Sunstate Acctg & Tax Services, PA

(Firm/Company)

6925 112th Circle Suite 102

(Address)

Largo FL 33773

(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Cramer

(Name of Contact Person)

at 727 548-4400

(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:**

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



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 Department of State is: Brother's Food Mart LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L14000065650
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 05/02/2014
4. I, Judd Rivas, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Managing 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)