## 14000092363

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W. S. L. L. L.

CR2E079 (2/14)

TO: Registration Section Division of Corporations
SUBJECT: LEMON CITY TEA & TAPLIC (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:
LAUREN FERNANDEZ (Contact Person)
LOMON CITY TEA & TAPLLC (Firm/Company)
(Address) (Address)
MIAMI BEACH, FC 33141 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 5054499 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\square\$ \$25 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Control Building 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)

	imited liability company as	it appears on the records of the I	Florida Departme	nt 
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4.1. Gall H	nber/manager withdrew/resi	igned or will withdraw/resign is:, hereby withdraw/resign as		7-
,	R MANAGER		ml <b></b>	·
resignation in writ	ing.	e limited liability company has b	IT AUG 24	y Ti
	sociating Member or Resign \$25.00 (Required) \$30.00 (Optional)	ning Manager	## II: 28	,