L14000114155

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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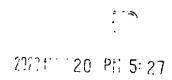
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COVER LETTER

TO:	Registration Section Division of Corporations	
oun I	VANGUARD FOODS TRADING	3 LLC
20R1	ECT: (Name of	Limited Liability Company)
The e	nclosed member, resignation or diss	ociation and fee(s) are submitted for filing.
Please	return all correspondence concerni	ng this matter to:
RONA	LD CHUMACEIRO	
	(Contact Person)	
VANC	GUARD FOODS TRADING LLC	
	(Firm/Company)	
5580 8	NW 84 AVE	
	(Address)	
DORA	AL, FLORIDA 33166	
	(City/State and Zip Code)	
For ft	urther information concerning this r	natter, please call:
RONA	ALD CHUMACEIRO	813 508-2359 at ()
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
	osed please find a check made payal 25 Filing Fee	ole to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303





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)

	limited liability company as it appears on the records of the Florida Department GUARD FOODS TRADING LLC
2. The Florida doc L 14000174755	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
TODOT OB TON	
MBR	
	(Print Title)
resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)