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COVER LETTER

Division of Corporations Big Mouth Eatery, LLC SUBJECT: (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: Thomas D. Wright, Esq. (Contact Person) Law Offices of Thomas D. Wright, Chartered (Firm/Company) 9711 Overseas Highway (Address) Marathon, FL 33050 (City/State and Zip Code) For further information concerning this matter, please call: Susan M, Lovley (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 Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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)

	limited liability company as fouth Eatery, LLC		of the Florida Departmen
2. The Florida doc L15000000402	ument/registration number a	ssigned to this limited liab	oility company is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/re	sign is: August 31, 2020
4. I, David G. Ruesch, hereby withdraw/resign as a, hereby withdraw/resign as a,		esign as a	
Manager/Member	<u> </u>		
	(Print Title) bility company and affirm thiting.	he limited liability compan	
Signature of D	issociating Member or Resig	gning Manager	FILAN
	\$25.00 (Required) \$30.00 (Optional)		RY OF STA