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COVER LETTER

Division of Corporations	
SUBJECT: Managota Key C. (Name of Lime	ted Liability Company)
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
Nichole M. G:// (Contact Person)	—————————————————————————————————————
Manasota Coffee Con	and the second of the second o
2730 N. Beach Rd.	
Englents, FL 34223 (City/State and Zip Code)	
For further information concerning this matter	er, please call:
Nichde M. Gill (Name of Contact Person)	at (239) 209-3792 (Area Code & Daytime Telephone Number)
Englosed please find a check made payable to \$25 Filing Fee	
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

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)

	limited liability company as it a		
of State is:	Manasota Key Coft	ee Company, Ll	<u>C</u>
	ment/registration number assig	• ,	
L1500	0072/78	. `	
	mber/manager withdrew/resign	ed or will withdraw/resign	n is: July 11,2015
4. 1, Paul (Print N	D. Grown Jame of Person Resigning)	, hereby withdraw/resig	n as a
Manage	(Print Title)		
	bility company and affirm the li	imited liability company h	as been notified of my
Jen	Phr		SSEED BY
Signature of D	ssociating Member or Resignin	g Manager	50 F
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		