## L150000 79855

(F	Requestor's Name)		
(Address)			
(/	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
<b>(</b> i	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only



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November 6, 2015

LILIANA GUAUNA 7799 PINES BLVD PEMBROKE PINES, FL 33024

SUBJECT: MONTANO HOSPITALITY, LLC

Ref. Number: L15000079855

We have received your document for MONTANO HOSPITALITY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 715A00023547

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

## TRANSMITTAL LETTER

SUBJECT: Montano Hospitality D/B/A Pa' Donde Moncho (Name of Corporation) DOCUMENT NUMBER: L15000079855 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Liliana Guauna (Name of Person) Montano Hospitality DBA Pa' Donde Moncho (Name of Firm/Company) 7799 Pines Blvd (Address) Pembroke Pines, FL 33024 (City/State and Zip Code) For further information concerning this matter, please call: Ramon Montano (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301



## 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 Depart	tment
of State is: <u>Mo</u>	ortano Huspitality UC	-	
2. The Florida docu	ument/registration number assigned to t		•
4500007	9855	TORICE CONTRACTOR	
dell	ember/manager withdrew/resigned or wi	T.C. 🛌	1627,11,201
4. I, <u>Attiliac</u> (Print No. V. Fa.)	ame of Person Resigning). here	by withdraw/resign as a CORD CORD	in and in a second of the seco
<u> </u>	tace of Person Resigning) tace (Print Title)	, rac.	
of this limited liab	bility company and affirm the limited li	ability company has been notified o	of my
resignation in wri	iting.		
<u> Ailitu</u>	a Gineria -	· 	
Signature of Di	issociating Member or Resigning Mana	ger	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		