

L15000112568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

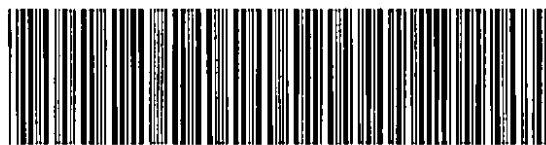
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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12/07/17--01012--021 \*\*75.00

18 JUN 19 PM 1:30  
FBI

CLERK'S OFFICE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 8, 2017

JULIAN BORRERO  
12365 SW 18 ST, APT 211  
MIAMI, FL 33175

SUBJECT: DON HECTOR GOURMET, LLC  
Ref. Number: L15000112568

We have received your document for DON HECTOR GOURMET, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please enter date member withdrew/resigned from entity.

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

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 817A00024898

RECEIVED

JAN 18 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DON HECTOR GOURMET LLC.  
(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:

Julian BORRERO

(Contact Person)

(Firm/Company)

12365 SW 18 ST APT 211.

(Address)

Miami FL 33175

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person)

at ( )

(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

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
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 OR MEMBER  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**  
(Pursuant to 605.0216, Florida Statutes)

10/30/18  
FEB 1:30  
FEB 1:30

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: DON HECTOR GOURMET LLC

2. The Florida document/registration number assigned to this limited liability company is:

L 15000112568

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/30/2017

4. I, LOREANA Méndez, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Authorized Member  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Loreana Méndez

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)



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)

16 JUL 16 11:30  
16 JUL 16 11:30  
16 JUL 16 11:30

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: DON HECTOR GOURMET LLC

2. The Florida document/registration number assigned to this limited liability company is:

L15000112568

3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_\_

4. I, LOREANA MENDOZA, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Authorized Member  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Loreana Mendez

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)