L15000168414

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

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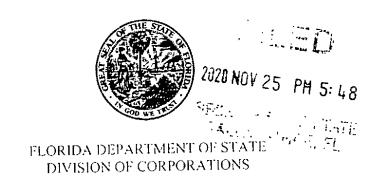
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Gil & Rick's Spoprts Ba	
()	Name of Limited Liability Company)
The enclosed member, resignatio	n or dissociation and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to:
Gilbert Grim	
(Contact Pers	on)
Gil & Rick's Sports Bar & Pizzeria LL	
(Firm/Compa	ay)
663 Gershwin Drive	
(Address)	
Largo, FL 33771	
(City/State and Z	ip Code)
For further information concerni	ng this matter, please call:
Gilbert Grim	at () (Area Code & Daytime Telephone Number)
(Name of Contact Perso	n) (Area Code & Daytime Telephone Number)
Enclosed please find a check ma ■ \$25 Filing Fee	ide payable to the Florida Department of State for: S55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303



DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

Gil	ne limited liability company a & Rick's Sports Bar & Pizzeria LL	is it appears on the records of the l	Florida Department
2. The Florida do	ocument/registration number :	assigned to this limited liability co	ompany is:
L15000168414		·	
3. The date this i	nember/manager withdrew/ro	esigned or will withdraw/resign is:	June 15, 2019
Richard Johns		, hereby withdraw/resign a	
(Prin	t Name of Person Resigning)		
Vice President			
	(Print Title)		
resignation in	liability company and affirm writing. Let	the limited liability company has	been notified of my
Filing Fee:	\$25.00 (Required)		

\$30.00 (Optional)

Certified Copy: