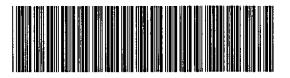
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(Requestor's Name)					
(Address)					
(Address)					
(C	City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

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JUL 83 2013 BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: SOUTHERN TACO LLC Inever agreed or (Name of Limited Liability Company) Authorized to be added to the
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
ERIC LACEFIELD E.L.
SOUTHERN THEO, LLC (Firm/Company)
13011 Purche Ave
Evardena CA 90249
(City/State and Zip Code)
For further information concerning this matter, please call:
ERIC LACEFIELD 31373, 559 13362
(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 \$25 Filing Fee & Certified Copy \$55 Filing Fee & Certified Cop

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)



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)

1. The name of the	limited liability company as	it appears on the records of the	e Florida Department		
of State is:	OUTHERN TAC	20 LLC	·		
2. The Florida docu	ment/registration number as:	signed to this limited liability	company is:		
L 150	100185304				
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resign i	is: <u>JAN 22, 2016</u>		
4.1. Eric L	ACEPIELD	, hereby withdraw/resign	as a		
(Print N	ame of Person Resigning)	ERIC UNCEPTE	LD CONTRACTOR		
(Print Name of Person Resigning) AUTHORIZED MEMBER INEVER AUTHORIZEDO					
	(Print Title)	AMREED TO BE	= PART OF THIS,		
of this limited liab	cility company and affirm the ting.	ACIREED TO BE OUTHERN TACO LL Imited liability company has	s been notified of my		
	///				
Signature of Dr	ssociating Member or Resign	ning Manager			
			~7		
Filing Fee:	\$25.00 (Required)		2		
Certified Copy:	\$30.00 (Optional)		5		
			ASS F		
			SER 2		

CR2E079 (2/14)