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## **COVER LETTER**

Division of Corporations	
SUBJECT: BIKING Sport Ros and Lounge LL (Name of Limited Liability Company)	C
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Yunieski Gonzalez (Contact Person)	
Billini Sport Bax and Lounge LLC	
7309 Collins Ave, Miami Beach, FL, 3314	<u>/</u>
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Yuneski Gourdez at (305) 770 5431 (Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:  2 \$25 Filing Fee  Certified Copy	.مــه
	/ 3
STREET/COURIER ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP.O. Box 63272661 Executive Center CircleTallahassee, Florida 32314	20 mm 18
Tallaharan Phalida 22201	(3.7

CR2E079 (2/14)

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)

1. The name of the	limited liability company as it a	ppears on the	records of the Flo	rida Department
of State is: B	Kini Sport Ba	cand	Lourge	<u>LLC</u> .
2. The Florida docu	ment/registration number assign	ned to this lin	nited liability comp	pany is:
•	0057756			, 1
3. The date this me	mber/manager withdrew/resigne	d or will with	ndraw/resign is: <u>C</u>	F1/15/PC
4.1, Felix	), DiaZ ame of Person Resigning)			
manag	Print Title)			
of this limited lial resignation in wr	oility company and affirm the lin	nited liability	company has bee	n notified of my
Signature of Di	(9) ssociating Member or Resigning	Manager	<u> </u>	^ <u>-</u>
3. <b>6</b>		,		· ·
Filino Fee:	\$25.00 (Required)			, ·
_	\$30.00 (Optional)			