

L16000071786

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ARIMIR SERVICES GROUP LLC
Account Number : I20200000022
Phone : (305)420-5722
Fax Number : (305)643-5225

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
H&TFF RESTAURANTS FLORIDA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2020 SEP -2 AM 9:59

2020 SEP -2 PM 11:27

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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 Florida Department of State is: H&TFF RESTAURANTS FLORIDA LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000071786

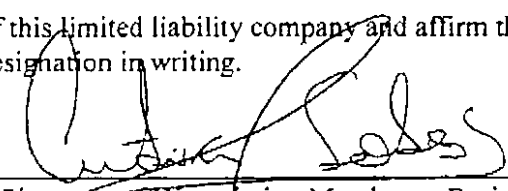
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/01/2020

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

MANAGER

(Print Title)

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


Signature of Dissociating Member or Resigning Manager

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

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