## 116000159383

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(Address)				
(Address)				
(City/State/Zip/Phone #)				
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## **COVER LETTER**

_	stration Section sion of Corporations			
SUBJECT:	Bubba Rose Biscuit LLC			
	(Name of Limited Liability Company)			
The enclosed	d member, resignation or dissocia	ation and fee(s	s) are submitted for filing.	
Please return	all correspondence concerning	this matter to:		
Jessica Dis	sbrow			
	(Contact Person)		_	
Bubba Ros	e Biscuit LLC			
	(Firm/Company)		_	
1785 NW 2	21st Terrace			
	(Address)		_	
Miami, FL	33142			
	(City/State and Zip Code)		_	
For further in	nformation concerning this matte	er, please call:		
Jessica Dis	sbrow	786	801-0200	
(N	lame of Contact Person)		& Daytime Telephone Number)	
Enclosed ple ■ \$25 Filing	ease find a check made payable to g Fee		Department of State for: g Fee & Certified Copy	
STREET/C Registration	OURIER ADDRESS:		MAILING ADDRESS: Registration Section	
-	Corporations		Division of Corporations	
Clifton Build	ding		P.O. Box 6327	
	ive Center Circle Florida 32301		Tallahassee, Florida 32314	

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 lin	mited liability company as it a	ppears on the records of the I	Florida Depa	rtment
of State is:	Rose Biscuit LLC		. <u></u> .	·
2. The Florida docum L16000159383	nent/registration number assign	ned to this limited liability co	ompany is:	
3. The date this mem	ber/manager withdrew/resigne	d or will withdraw/resign is:	01/26/18	
4. I. Eric Talley (Print Nan	ne of Person Resigning)	_, hereby withdraw/resign as	s a	
Member				
(P)	rint Title)			
of this limited liabil resignation in writing	lity company and affirm the lir	nited liability company has b	oeen notified	of my
Signature of Diss	ociuting Member or Resigning	g Manager	18 FE	SECR SECR
C	\$25.00 (Required) \$30.00 (Optional)		B-1 AMII: N	FILED ETARY OF STATE FOR CORPORATION