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September 25, 2018

THOMAS HOFFMAN CAP & HOFF VENDING, LLC 1711 SW 83RD AVE. MIAMI, FL 33155

SUBJECT: CAP & HOFF VENDING, LLC

Ref. Number: L16000207821

We have received your document for CAP & HOFF VENDING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 418A00020010

COVER LETTER

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CR2E079 (2/14)

TO: Registration Section Division of Corporations	
SUBJECT: Cap + Haff \(\) (Name of Limited Lia	
The enclosed member, resignation or dissociation a	and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to:
Thomas Hoffman (Contact Person)	
Corp + Hiff Vanding, LLC (Pirm/Company)	
1711 SW 83RP AJE (Address)	
Mami, FL 33155 (City/State and Zip Code)	
For further information concerning this matter, ple	ase call:
Thomas Haffman at (786) 863-7000 Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee \$\sim\$ \$	Florida Department of State for: 55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314





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: CAP + HOFF Vending LLC
2. The Florida document/registration number assigned to this limited liability company is:
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10 11 2018
4. I, hereby withdraw/resign as a
(Print Name of Person Resigning)
AMBR.
(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) AIREADY PAID Certified Copy: \$30.00 (Optional)
First ocean administrates