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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Nuts 4 Donuts, LLC	
(Name of Lir	nited Liability Company)
The enclosed member, resignation or dissoc	iation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
Tom Venetis	
(Contact Person)	
(Firm/Company)	
9421 Chartwell Breeze Dr	
(Address)	
Bonita Springs, Fl 34135	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
Tom Venetis	239 980-3505
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable ☐ \$25 Filing Fee	to the Florida Department of State for: \$\mathbb{\textbf{Y}}\$ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
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)

		s it appears on the records of the	Florida Department
	ument/registration number as	ssigned to this limited liability c	ompany is:
4. I,	3	igned or will withdraw/resign is	
AMBR	(Print Title)		
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability company has l	been notified of my
Signature of D	issociating Member or Resign	ning Manager	2019 F
	\$25.00 (Required) \$30.00 (Optional)		ZOUPFEB 13 PH 1: