

**U8000150511**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

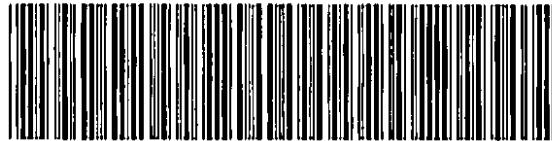
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**100317569911**

DP 2013--0013--001 4\*00.00

2018 AUG 28 PM 1:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

**FILED**

JK  
6-18  
OK

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lechonera Tibarita LLC.

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Edwin Rivera

(Contact Person)

Edwin Rivera & Associates CPA PA

(Firm/Company)

9741 S. Orange Blossom Trail, Suite 2

(Address)

Orlando Florida 32837

(City/State and Zip Code)

For further information concerning this matter, please call:

Edwin Rivera

(Name of Contact Person)

at (407) 704-8963

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$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

FILED



2018 AUG 28 PM 1:36

SECRETARY OF STATE  
TALLAHASSEE, FL

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: Lechonera Jibarita LLC

2. The Florida document/registration number assigned to this limited liability company is: L18000150511

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/1/2018

4. I, Hector Cosiano Burgos, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGR

(Print Title)

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

A handwritten signature in black ink, appearing to read "Hector Cosiano Burgos".

\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

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