LI8000154	2457
(Requestor's Name)	
(Address)	
(Address)	500352226815
(City/State/Zip/Phone #)	
(Business Entity Name)	03/21/2001020001 ++75.00
(Document Number)	
ertified Copies Certificates of Status	
Special Instructions to Filing Officer:	2021 FEB 22 PM SECRETARY OF TALLAHASSE
	PM 4: 44 VSSEE.FL
Office Use Only	
	MAR 3 0 2021
	D CUSHING

## **COVER LETTER**

**TO:** Registration Section Division of Corporations

٦

GOURMET BKM CATERING, LLC **SUBJECT:** 

(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:

STEVEN A SPENCER.

(Contact Person)

STEVEN A SPENCER & ASSOCIATES

(Firm/Company)

1900 E. ROBINSON ST

(Address)			SECS RAT	2021 F	
DRLANDO, FLORIDA 32803				-EB 22	
(City/State and Zip Code	:)		ARY O		: [ <b>1</b> ]
For further information concerning thi	is matter, please ca	11:		PH 4:	Ö
STEVEN A SPENCER	407at (	894.0081		<del>ل</del> ا ا	
		1 0 12 1 11			

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

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

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 23, 2020

STEVEN A. SPENCER STEVEN A. SPENCER & ASSOCIATES 1900 E. ROBINSON STREET ORLANDO, FL 32803

COPY

11:

7

SUBJECT: GOURMET BKM CATERING, LLC Ref. Number: L18000155659

We have received your document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

This department cannot accept photocopies. Please complete the attached form. A second check or money order is not necessary?

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) 245-6050.

JEARLD H QUICK OPS

Letter Number: 720A00021090

www.sunbiz.org



MIFEB 22 PH U: U

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)

GOURMET BKM CA <b>7</b> ERING, LI of State is:	er assigned to this limited liability company is:
L18000155659	
3. The date this member/manager withdrew	/resigned or will withdraw/resign is:
RAFAFL PORTAL 4 T	, hereby withdraw resign as a
4. I(Print Name of Person Resigning)	
MEMBER PARTNER	
(Peint Title)	
of this limited liability company and affirm resignation in writing	n the limited liability company has been notified of my
Signature of Dissociating Member or Re	esigning Manager

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

CR2E079 (2-14)