L18000 159 7/3

| (Re | equestor's Name) | | | |
|---|--------------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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NOV 14 2019 S. YOUNG



October 29, 2019

OSCAR RODRIGUEZ LOS TAPATIOS LLC 231 SEMORAN COMMERCE PLACE # 100B APOPKA, FL 32703

SUBJECT: LOS TAPATIO'S LLC Ref. Number: L18000159713

We have received your document for LOS TAPATIO'S LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

JOSE GONZALEZ RIVERA IS NOT LISTED AS REGISTERED AGENT

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.

Letter Number: 019A00022344

Shelia H Young Regulatory Specialist II

www.sunbiz.org

COVER LETTER

| TO: Registration Section | | |
|--|---------------------|---|
| Division of Corporations | | |
| SUBJECT: Los Tapatio's LLC | | |
| (Name of | Limited Liability C | ompany) |
| The enclosed member, resignation or diss | sociation and fee | (s) are submitted for filing. |
| Please return all correspondence concerni | ing this matter to |): |
| Oscar Rodriguez | | |
| (Contact Person) | | |
| Los Tapatio's LLC | | |
| (Firm/Company) | | _ |
| 231 Semoran Commerce PL #100B | | |
| (Address) | | _ |
| APopka, Florida 32703 | | |
| (City/State and Zip Code) | | |
| For further information concerning this n | natter, please cal | 1: |
| Oscar Rodriguez | 321 | 370-8215 |
| (Name of Contact Person) | | de & Daytime Telephone Number) |
| Enclosed please find a check made payab ☐ \$25 Filing Fee | | Department of State for: ng Fee & Certified Copy |
| STREET/COURIER ADDRESS: | | MAILING ADDRESS: |
| Registration Section | | Registration Section Division of Corporations |
| Division of Corporations Clifton Building | | P.O. Box 6327 |

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle Tallahassee, Florida 32301



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)

| | | ssigned to this limited liability co | onpany is: |
|--|--|--------------------------------------|--------------------------|
| L1800015971 | _ | | |
| 3. The date this me | mber/manager withdrew/res | igned or will withdraw/resign is: | 10/19/2019 |
| Jose Gonzalez Rivera 4. I, hereby withdraw/s | | | |
| (Print N Member | 'ame of Person Resigning) | | |
| | (Print Title) | | |
| of this limited lia resignation in wr | | e limited liability company has b | ocen notified of my |
| Signature of Di | issociating Member or Resig | ning Manager | 75.00 M |
| | \$25.00 (Required) \$30.00 (Optional) | | MBV 12 MEII MBSSCELFE |