## 11800163020

(Red	questor'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:				





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## **COVER LETTER**

CR2E079 (2/14)

TO:	_	stration Section sion of Corporations		
SUBJ	JC & MM CATERING SERVICES LLC			
		(Name of Limi	ited Liability Cor	npany)
The en	nclosed	I member, resignation or dissocia	ation and fee(s	s) are submitted for filing.
Please	e return	all correspondence concerning	this matter to:	
MAR	IA ES	THER ENTRENA		
		(Contact Person)		_
JC &	мм с	CATERING SERVICES LLC		
		(Firm/Company)		_
8999	NW 1	07 CT APT 109		
		(Address)		<del>-</del>
DOR	AL FL	33178		
-	•	(City/State and Zip Code)		_
For fu	irther ii	nformation concerning this matte	er, please call:	
MAR	IIA ES	THER ENTRENA	718 at (	679-6305
	(N	ame of Contact Person)		& Daytime Telephone Number)
	sed ple 5 Filing	ease find a check made payable to g Fee		Department of State for: g Fee & Certified Copy
		OURIER ADDRESS:		MAILING ADDRESS:
		Section Corporations		Registration Section Division of Corporations
Clifto	n Build	ding		P.O. Box 6327
		ive Center Circle Florida 32301		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:JC & MM CATERING SERVIC	ES LLC ES LLC
2. The Florida document/registration number as L18000163020	signed to this limited liability company is:
3. The date this member/manager withdrew/resi	gned or will withdraw/resign is: <u>-11-28-2</u> D/8
A A A DI CAUCA A DENIA MECO	
4. 1, (Print Name of Person Resigning)	
MANAGER	
(Print Title)	
of this limited liability company and affirm the resignation in writing.	e limited liability company has been notified of my
. My Sunday	
Signature of Dissociating Member or Resign	ning Manager
Filing Fee: \$25.00 (Required)	

Certified Copy: \$30.00 (Optional)