L18000283503

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(34.	omiooo Emily (10)	,,,,,		
/Do	aumant Number			
(00	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			

Office Use Only



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COVER LETTER

TO:	-	stration Section ion of Corporations		
SUBJ		G&R WINE SELECTIONS		
		(Name of Lie	mited Liability Co	ompany)
The er	nclosed	l member, resignation or disso	riation and fee	(s) are submitted for filing.
Please	return	all correspondence concerning	g this matter to	:
OLIVE	R RUIZ			
		(Contact Person)		_
G&R V	VINE SI	ELECTIONS LLC		
		(Firm/Company)		_
733 W	26TH S	TREET		
		(Address)		_
HIALE	AH, FL	. 33010		
		(City/State and Zip Code)		_
For fu	rther ir	nformation concerning this mat	ter, please call	:
OLIVE	R RUIZ		917 at (731-2707
	(N	ame of Contact Person)		e & Daytime Telephone Number)
	sed ple Filing	ase find a check made payable g Fee		Department of State for: ng Fee & Certified Copy
		g Address:		Street Address:
	_	tration Section ion of Corporations		Registration Section Division of Corporations
	P.O. I	Box 6327		The Centre of Tallahassee
	Tallal	nassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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)

	limited liability company as WINE SELECTIONS	it appears on the records of the	he Florid	a Depa	artment
2. The Florida doc L18000283503	ument/registration number ass	signed to this limited liability	7	202	
CLANDAOLO C	ember/manager withdrew/resignatesignal in the second secon			1 Har -7 MM 6: 22	
	(Print Title) bility company and affirm the iting.	: limited liability company ha	>- as been n	otified	of my
	ssociating Member or Resign	ing Manager			
Certified Copy:	\$30.00 (Optional)				