

119 0000 58798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

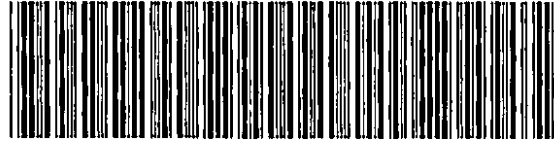
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900357859649

01/26/21--01007--007 **25.00

2021 JAN 26 PM 5:20
FILED
MAR 04 2021

O SIMMONS
MAR 04 2021



2021 JAN 26 PM 5:20

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: HOUSE OF FLAVORS USA LLC

2. The Florida document/registration number assigned to this limited liability company is:
L19000058798

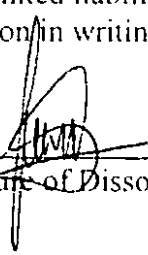
3. The date this member/manager withdrew/resigned or will withdraw/resign is: _____

4. I, JUAN PABLO LOPEZ, hereby withdraw/resign as a
(Print Name of Person Resigning)

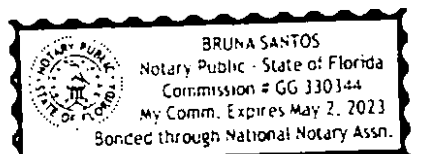
MANAGER


(Print Title)

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



Signature of Dissociating Member or Resigning Manager




1/25/23