

L20 000030243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

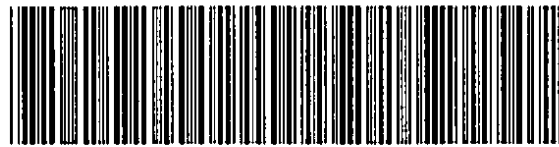
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 13, 2020

RONNY MARTINEZ  
LA CUNA DEL SABOR LLC.  
430 BEDLINGTON CT  
KISSIMMEE, FL 34758

SUBJECT: LA CUNA DEL SABOR LLC.  
Ref. Number: L20000030243

We have received your document and check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

JONATHAN ALMONTE IS LISTED AS AN AUTHORIZED PERSON. PLEASE COMPLETE THE ATTACHED DISSOCIATION FORM AND RESUBMIT. HE IS LISTED AS THE CFO.

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 220A00022713

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: La Cuna del Sabor LLC  
(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:

Ronny Martinez  
(Contact Person)

La Cuna del Sabor / EL Alamo Food truck  
(Firm/Company)

430 Bedlington Ct.  
(Address)

Kissimmee FL 34758  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ronny Martinez at ( 407 ) 453-1634  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: La Cuna del Sabor LLC.

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

L20000030243

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/1/20 Jonnathan Almonte

4. I, Jonnathan Almonte, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Chief Financial Officer  
(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

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

2021 JAN 14 PM 6:27