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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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COVER LETTER

TO: Registration Section	
Division of Corporations	
Old 98 Restaurant Group. LLC	
(Name of Li	mited Liability Company)
The enclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
Huy Nguyen	
(Contact Person)	
Old 98 Restaurant Group, LLC	
(Firm/Company)	
102 Goldfish Court	
(Address)	
Port St. Joe, FL 32456	
(City/State and Zip Code)	
For further information concerning this mat	tter, please call:
Huy Nguyen	850 247-0317 at ()
(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:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
Tattanassee, T. L. 32314	Tallahassee, FL 32303



2021 JAN 25 AM 7: 26

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)

	e limited liability company as it appears on the records of the Florida Department 98 Restaurant Group, LLC
	nument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I, John F. Taylor (Print)	, hereby withdraw/resign as a Name of Person Resigning)
Authorized Mem	
	(Print Title)
of this limited lia resignation in wi	bility company and affirm the limited liability company has been notified of my riting
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)