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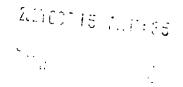
COVER LETTER

TO: Registration Section **Division of Corporations** GREEN MARKET CAFE FRANCHISE DEVELOPMENT LLC SUBJECT: (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: Anton Hopen (Contact Person) Smith & Hopen PA (Firm/Company) 180 Pine Avenue North (Address) Oldsmar, FL 34677 (City/State and Zip Code) For further information concerning this matter, please call: Anton Hopen 813 925-8505 (Name of Contact Person) (Area Code & Davtime 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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)

	imited liability company as it appears on the records of the Florida Department ARKET CAFE FRANCHISE DEVELOPMENT LLC
2. The Florida docu L20000070755	ment/registration number assigned to this limited liability company is:
3. The date this mer	nber/manager withdrew/resigned or will withdraw/resign is:
A = d C 1/	
Manager	
	Print Title)
of this limited liab resignation in wri	ility company and affirm the limited liability company has been notified of ming.
Ch	10 / 07 / 2024
Signature of Dis	sociating Member or Resigning Manager
•	\$25.00 (Required) \$30.00 (Optional)