L20 000 Z 98 558

(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:





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11/02/20--01034--001 **75.00

R. WHITE



CRIMINAL, CIVIL AND FAMILY LAW

October 28, 2020

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

RE: Hemingway Wine & Cigar Bar Lounge LLC

Dear Sir or Madam:

See enclosed the following completed forms in regard to this Company:

- 1. Member dissociation form
- 2. Statement of Change of Registered Agent
- 3. Articles of Amendment to Articles of Organization

I have included a check for the filing fees for all documents totaling \$75.00.

Please file and correct the records accordingly.

Thank you for your assistance in this regard.

Sincerely,

Sara Howeller

Sara Howeller SBH/ng



-2 711:19

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 lim	ited liability company as it appears on the records of the Florida Department
of State is: Hem?	ngway Wine & Cigar Bar Lounge LLC
2. The Florida docume	nt/registration number assigned to this limited liability company is:
L 2000002 9	<u>8558</u>
3. The date this member	er/manager withdrew/resigned or will withdraw/resign is: 10/27/20
	Meso hereby withdraw/resign as a of Person Resigning)
Manager	nt Title)
of this limited liabilit resignation in writing	y company and affirm the limited liability company has been notified of my
1/2	
Signature of Dissoc	ciating Member or Resigning Manager
Filing Fee:	•
Certified Copy:	\$30.00 (Ontional)