

(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:					

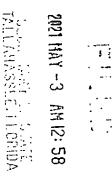
Office Use Only



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COVER LETTER

TO:	Registration Section					
	Division of Corporations					
	Steak Out Subs Clearwater LLC	-				
SUBJE	CCT:					
	(Name o	(Name of Limited Liability Company)				
The end	closed member, resignation or dis	ssociation and fed	e(s) are submitted for filing.			
Please 1	return all correspondence concer	ning this matter t	o:			
Chris Yo	oung					
	(Contact Person)					
Steak O	ut Subs Clearwater LLC					
	(Firm/Company)		_			
2322 Ca	dillac Street					
	(Address)					
Sarasota	/F1/34231					
	(City/State and Zip Code)		<u> </u>			
For furt	ther information concerning this	matter, please cal	1:			
Christop	her D Young	813	476-2388			
		at (
	(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)			
Enclose	ed please find a check made paya	ble to the Florida	Department of State for:			
	Filing Fee		ng Fee & Certified Copy			
	Mailing Address:		Street Address:			
	Registration Section		Registration Section			

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327



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 a	s it appears on the records of th	e Florida Dep	artment
	<u> </u>	<u> </u>		
2. The Florida doc 62-8018286568-2	-	assigned to this limited liability	company ::	- :
			4/27/2021	7
Christopher D Y	oung	signed or will withdraw/resign i	as a N	
4. 1, (Print !) Manager	Name of Person Resigning)	hereby withdraw/resign	2: 58	•
 	(Print Title)			
of this limited lia resignation in wr	* * *	he limited liability company has	s been notified	l of my
Signature of D	issociating Member or Resig	gning Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			