

121 000 162243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

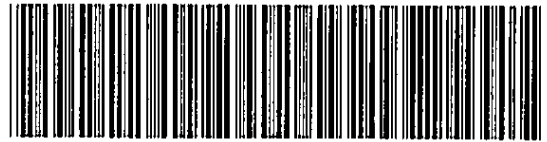
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NO. 21/21 - 401 2021 - 4021 *25.00

DATE
21 JUL 2021
PM 2:52

JUL 21 2021

Christopher H. Morrison, P.A.

ATTORNEY AT LAW

CMORRISON@WINTERPARKLEGAL.COM
401 W. FAIRBANKS AVENUE, SUITE 100
WINTER PARK, FLORIDA 32789

PHONE: (407) 539-2597
FAX: (407) 539-2978

June 16, 2021

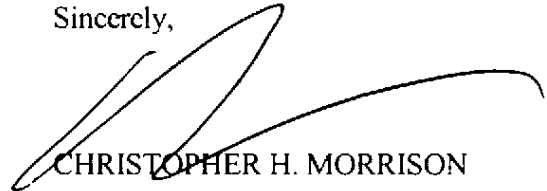
Florida Department of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: MENDOZA RESTAURANT ENTERPRISES, LLC

To Whom it May Concern:

Please find enclosed the resignation of member/officer Jhonatan Rodrigues.

Sincerely,

A handwritten signature in black ink, appearing to be 'CHRISTOPHER H. MORRISON', written over the printed name.

CHRISTOPHER H. MORRISON

Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mendoza Restaurant Enterprises, 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:

Christopher H Morrison, Esq

(Contact Person)

Christopher H Morrison, PA

(Firm/Company)

401 W Fairbanks Ave

(Address)

Winter Park, FL 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher H Morrison

at (407) 539-2597

(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: Mendoza Restaurant Enterprises, LLC

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

L21000162243

3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 10, 2021

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

AMBR

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Dissociating Member or Resigning Manager

PM 2:52
RECEIVED

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