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## **COVER LETTER**

TO: Registration Section **Division of Corporations** KATO HOSPITALITY GROUPL L.L.C. (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: **BRANDON HELVERSON** (Contact Person) KATO HOSPITALITY GROUP L.L.C. (Firm/Company) 1717 N BAYSHORE DR 3639 (Address) MIAMI FL 33132 (City/State and Zip Code) For further information concerning this matter, please call: BRANDON HELVERSON (Area Code & Daytime Telephone Number) (Name of Contact Person) 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 **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 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)

2. The Florida document/registration number ass	signed to this limited liability company is:
L21000315760	
3. The date this member/manager withdrew/resignatures south florida management marketing consult	· · · · · · · · · · · · · · · · · · ·
(Print Name of Person Resigning)	, hereby withdraw/resign as a
MGR	(元) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
(Print Title)	SSE P
of this limited liability company and affirm the resignation in writing.	limited liability company has been notified of my
	Val-

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)