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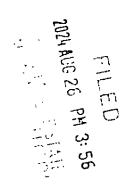
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Certified Copies	Cedificate	e of Statue
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Special Instructions to I	Filing Officer:	
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		J. HORNE AUG 2 8 2024
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Office Use Only



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COVER LETTER

TO:	•	tration Section ion of Corporations		
	DIVIS	ion of Corporations		
SUBJI	ECT:	Best Coffe 10 LLC		
		(Name of I	Limited Liability Con	mpany)
The en	closed	member, resignation or diss	ociation and fee(s) are submitted for filing.
Please	return	all correspondence concerni	ng this matter to:	
Gonzale	o Lopez	. Jordan		
		(Contact Person)		_
Patagor	nia Cap	ital Investments LLC		
		(Firm/Company)		_
1200 B:	rickell /	Ave Ste 1950		
		(Address)		_
Miami	FL 331	31		
		(City/State and Zip Code)		_
For fur	ther in	nformation concerning this m	atter, please call:	
Gonzal	o Lope:	z Jordan	305 at (961 1698
	(N	ame of Contact Person)		e & Daytime Telephone Number)
Enclos ■ \$25	•	ase find a check made payab 3 Fee		Department of State for: g Fee & Certified Copy
	Mailir	ı <u>g Address:</u>		Street Address:
	Regis	stration Section		Registration Section
		sion of Corporations Box 6327		Division of Corporations The Centre of Tallahassee
		hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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 Departme	nt
of State is: Best	Coffee 10 LLC	·
2. The Florida doc 1.21000497930	ment/registration number assigned to this limited liability company is:	
3. The date this m	mber/manager withdrew/resigned or will withdraw/resign is:	_
4. l,	I Investments LLC, hereby withdraw/resign as a ame of Person Resigning)	
Manager		
	Print Title)	
of this limited lin resignation in w	pility company and affirm the limited liability company has been notified of nations.	V
Signature of E	ssociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	
Certified Conv	\$30.00 (Ontional)	