## L21000 498 103

(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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2024 AUG 26 PM 2: 12 SECRETARY OF STATE TALLARY SEES FL



## **COVER LETTER**

TO:	Registration Section						
	Divis	sion of Corporations					
SUBJ	ECT:	Best Coffe 18 LLC					
		(Name of	Limited Liability Con	npany)			
The e	nclosed	d member, resignation or dis	sociation and fee(s	s) are submitted fo	or filing.		
Please	return	all correspondence concerr	ning this matter to:				
Gonza	do Lope	z Jordan					
		(Contact Person)		_			
Patage	mia Cap	oital Investments LLC					
		(Firm/Company)		<del>-</del>	_		
1200 1	Brickell	Ave Ste 1950			2024 AUG 26 PH 2: 12 SEGRETARY OF STATE SEALLARY OF STATE		
		(Address)		<del>-</del>	JG 26 ETAR		
Miam	i FL 331	131			97 OF PH 9		
		(City/State and Zip Code)		_	F. 50 72		
For fu	irther is	nformation concerning this i	natter, please call:		PAIR 12		
Gonza	ilo Lope	z Jordan	305 at (	961 1698 )			
	(N	lame of Contact Person)		& Daytime Teleph	ione Number)		
	sed ple 5 Filin	ease find a check made paya g Fee		Department of Sta g Fee & Certified			
	Regi: Divis P.O.	ng Address: stration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee Street, Suite 810		



## 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 of State is:	limited liability company a	as it appears on the re	cords of the Flori	da Department	
of State is:		<del></del>		<del></del> ·	
2. The Florida docu L21000498103	iment/registration number	assigned to this limite	ed liability compa	ny is:	
3. The date this me	mber/manager withdrew/ro	esigned or will withdr	raw/resign is:	/2024	
4. 1. Patagonia Capita	d Investments LLC	, hereby withdraw/resign as a			
Manager Manager	ame of verson Kesigning)		5. -1.	2024	
(	(Print Title) pility company and affirm (		ALL A	AUG 2	
of this limited lial resignation in wri	pility company and affirm thing.	the limited liability co	ompany has been	notified of my	
Signature of	ssocialing Member or Resi	igning Manager	-	1.1	
Filing Fee:	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				