h21000531934

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

Office Use Only



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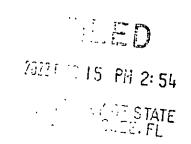
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COVER LETTER

	sion of Corporations			·
SUBJECT:	YOLOKBBQ, LLC			
SOBSECT.		Limited	Liability Co	mpany)
The enclose	ed member, resignation or dis	sociatio	n and fee(s) are submitted for filing.
Please return	n all correspondence concern	ing this	matter to:	
RAY PARK				
	(Contact Person)			_
	(Firm/Company)		<u></u>	_
7 FORT ROY	'AL ISLE			
	(Address)			_
FORT LAUD	PERDALE, FL 33308			
	(City/State and Zip Code)			_
For further i	information concerning this n	natter, p	lease call:	
RAY PARK		at	571 (217-6532
(1)	Name of Contact Person)		(Area Code	& Daytime Telephone Number)
Enclosed ple	ease find a check made payat	ole to th	e Florida I	Department of State for:
■ \$25 Filin	ig Fee		\$55 Filin	g Fee & Certified Copy
· · · · · · · · · · · · · · · · · · ·	ing Address: istration Section			Street Address: Registration Section
Divi	sion of Corporations			Division of Corporations
	Box 6327			The Centre of Tallahassee
Talla	ahassee, FL 32314			2415 N. Monroe Street, Suite 81 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)

	e limited liability company as it appea OKBBQ, LLC	ars on the records of the Florida Department.
2. The Florida doc L21000531934	ument/registration number assigned	to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or	will withdraw/resign is: 12-8-2022
DOMO PIM	Name of Person Resigning)	
MGR		
	(Print Title)	
of this limited lia resignation in wr	• •	d liability company has been notified of my
Signature of D	issociating Member or Resigning Ma	mager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	