

122000041376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

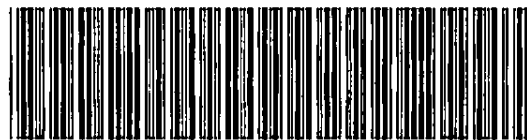
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2022 MAR -14 AM 7:29

SECRETARY OF STATE  
TALLAHASSEE, FL

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MAR 14 2022

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BILLY CHO, LLC

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224

963-6495

(Area Code & Daytime Telephone Number)

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☐ \$55 Filing Fee & Certified Copy

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FILED

2022 MAR -4 AM 7:30

SECRETARY OF STATE  
TALLAHASSEE, FL

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: BILLY CHO, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
1.22000041376

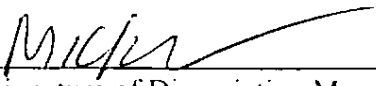
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/21/2022

4. I, MICHAEL CHO, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MANAGER MEMBER

*(Print Title)*

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

  
Signature of Dissociating Member or Resigning Manager

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