## L22000078669

(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:	
Operation state and the filling officer.	
J. HORNE	
AUG 1 3 2022	

Office Use Only



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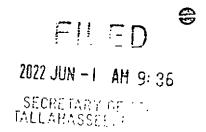
96/01/22--01011--009 4425.00



## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: La Strega Bistro LL (Name of Limited	(Liability Company)
The enclosed member, resignation or dissociati	on and fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to:
Manuel Gomes (Contact Person)	
La Strega Bistro LLL (Firm/Company)	· ·= -
2462 Ventura Ct (Address)	
DUtona, FL 32738 (City/State and Zip Code)	<del></del>
For further information concerning this matter,	please call:
Many() (name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t  ■ \$25 Filing Fee	he Florida Department of State for:  3 \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 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)

1. The name of the limited	d liability company as it appears on the records of the Florida Department
of State is: La Sty	rega Bistro LLL.
2. The Florida document/	registration number assigned to this limited liability company is:
L220000786	<u>69</u> .
3. The date this ptendber/i	nanager withdrew/resigned or will withdraw/resign is: 05/10/22
4.1, Ololo (Print Name of I	hereby withdraw/resign as a Person Resigning)
QUEF.	itle)
of this limited liability cresignation in writing.	ompany and affirm the limited liability company has been notified of my
Signature of Dissociat	ring Member or Resigning Manager
	5.00 (Required)