1220000 19317

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE AUG 28 2024				

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COVER LETTER

то:	Registration Section Division of Corporations			
SUBJI	Best Coffe 27 LLC ECT:			
.,, 0 121,70	(Name of Limited Liability Company)			
The en	nclosed member, resignation or disse	ociation and fee(s	s) are submitted for filing.	
Please	return all correspondence concerni-	ng this matter to:		
Gonzal	o Lopez, Jordan			
	(Contact Person)		-	
Patagor	nia Capital Investments LLC			
	(Firm/Company)			
1200 B	rickell Ave Ste 1950			
	(Address)		_	
Miami	FL 33131			
	(City/State and Zip Code)		_	
For fur	rther information concerning this m	atter, please call:		
Gonzal	o Lopez Jordan	305 at (961 1698)	
	(Name of Contact Person)		& Daytime Telephone Number)	
	sed please find a check made payable Filing Fee		Department of State for: g Fee & Certified Copy	
	Mailing Address:		Street Address:	
	Registration Section Division of Corporations		Registration Section Division of Corporations	
	P.O. Box 6327		The Centre of Tallahassee	
	Tallahassee, FL 32314		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)

Best	e limited liability company as Coffee 27 LLC	it appears on the records of the Florida Department
2. The Florida doc 1.22000079377	ument/registration number as	ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resi	igned or will withdraw/resign is:
4. I,	al Investments LLC Name of Person Resigning)	, hereby withdraw/resign as a
Manager		
.	(Print Title)	
of this limited lie resignation in w	7 * * * * * * * * * * * * * * * * * * *	e limited liability company has been notified of my
Signature of D	issociating Member or Resig	ning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	