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COVER LETTER

	gistration Section vision of Corporations			
SUBJECT	FOOD & BEV ENTERPRISES, LI	C		
	(Name of Limited Liability Company)			
The enclose	ed member, resignation or dissoc	ciation and fee	(s) are submitted for fili	ng.
Please retui	rn all correspondence concerning	g this matter to	:	
JESUS E SO	LER ALMONTE			
	(Contact Person)			
FOOD & BE	V ENTERPRISES, LLC			202
	(Firm/Company)		_	3 OC
11700 NW 10	02ND RÐ SUITE 2			2023 OCT - 2 AM 9: 44
	(Address)		_	SS: =
MEDLEY, F	L 33178			9: 4
-	(City/State and Zip Code)		_	· 📆 🐔
For further	information concerning this mat	ter, please call	:	
JESUS E SO	LER ALMONTE	786 at (2902338	
()	Name of Contact Person)		e & Daytime Telephone N	lumber)
Enclosed pl ■ \$25 Filir	ease find a check made payable ng Fee	to the Florida∣ □ \$55 Filin	Department of State for g Fee & Certified Copy	:
Reg Divi P.O.	ing Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporatio The Centre of Tallaha: 2415 N. Monroe Stree Tallahassee, FL 32303	ssee t, Suite 810

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)

1. The name of th	e limited liability company as it app	pears on the records of the Florida Dep	artment
of State is: FOO	DD & BEV ENTERPRISES, LLC		
		d to this limited liability company is:) .
CLAUDIA MII	ember/manager withdrew/resigned (ENA RUIZ RESTREPO	च्या देखे	
(Print i	Name of Person Resigning)	necesy withdrawnesign as a	-
of this limited lic resignation in w	(Print Title) (bility company and affirm the limit riting.	ed liability company has been notified	lofmy
Signature of D	issociating Member or Resigning M	lanager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		