L22000535190

(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



200399798752

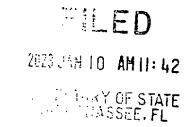


2023 JUNIO AMII: 42

COVERTETTER

TO: Registration Section Division of Corporations	
G&G Hospitality, LLC SUBJECT:	
(Name of Lim	ited Liability Company)
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
Evan Butchen	
(Contact Person)	
Evan Buichen, CPA	
(Firm/Company)	
731 NJ-18	
(Address)	
East Brunswick, NJ 08816	
(City/State and Zip Code)	
For further information concerning this matt	ter, please call:
Shlomo Ginsburg	863 666-7611 at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable ☐ \$25 Filing Fee	to the Florida Department of State for: S55 Filing 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)

	e limited liability company as it appears on the records of the Florida Department illospitality, LLC
2. The Florida doc 1.22000535190	ument/registration number assigned to this limited liability company is:
Evan Rutchan	ember/manager withdrew/resigned or will withdraw/resign is:
MGR	, hereby withdraw/resign as a same of Person Resigning)
	(Print Title) bility company and affirm the limited liability company has been notified of my iting.
Signature of Di	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)