## L 23000100586

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## ~ COVER LETTER

	Legistration Section Division of Corporation	S	
SUBJEC	CT: PRECIOUS	ISLAND BAKERY LLC (Name of Limited Liability Company)	
The encl	osed member, resignati	ion or dissociation and fee(s) are submitted for filing	g.
Please re	turn all correspondence	e concerning this matter to:	
}	HENRY G. ROE (Contact Per	DAN rson)	
	(Firm/Comp	pany)	
2108	3 WHISPER L (Address)	-AKES BLVD	
ORI	LANDO, FL 3 (City/State and	32837 Zip Code)	
For furth	er information concern	ning this matter, please call:	
HEA	IRY G, ROEDA (Name of Contact Person	N at (321) 624-7496 on) (Area Code & Daytime Telephone Nu	ımber)
	I please find a check ma iling Fee	ade payable to the Florida Department of State for:  ☐ \$55 Filing Fee & Certified Copy	
R D	<u>Mailing Address:</u> Legistration Section Division of Corporation LO. Box 6327	Street Address:  Registration Section  S Division of Corporation  The Centre of Tallahas	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



2023 DEC -4 Ph 12: 17

## 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 limit	ed liability company as it appears on the records of the Florida Department
_	JOUG ISLAND BAKERY LLC
2. The Florida documen	/registration number assigned to this limited liability company is:
L 230001	00586
3. The date this member	/manager withdrew/resigned or will withdraw/resign is: 11 30 2023
4.1. YGNACIO P (Print Name o	FNA VEGA , hereby withdraw/resign as a f Person Resigning)
MGR (Print	Title)
of this limited liability resignation in writing.	company and affirm the limited liability company has been notified of my
Signature of Dissocia	ating Member or Resigning Manager
Filing Fee: \$2 Certified Copy: \$3	· • ·