# L160000 92973

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2019 AUG -9 FH 2: 38

July 30, 2019

GEORGE BUNASSAR 9000 SW 140 STREET MIAM!, FL 33176

SUBJECT: HASROUN INVESTMENTS, LLC

SECRETARY OF VISIT TALLAHASSET FOR A

We have received your document for HASROUN INVESTMENTS, LLC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Document number listed on line 2 does not match the company's name.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 119A00015514

Mel Solomon
Regulatory Specialist II Supervisor

www.sunbiz.org

# 2018 AUS -9 PH 2:39

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Hasroun Investments, LLC	,	
	innted Liability Co	ompany)
The enclosed member, resignation or disso	ciation and fee	(s) are submitted for filing.
Please return all correspondence concerning	g this matter to	:
George Bunassar		
(Contact Person)		_
(Firm/Company)		
9000 SW 140 Street		
(Address)		_
Miami, FL 33176		
(City/State and Zip Code)		<del>_</del>
For further information concerning this ma	tter, please call	:
George Bunassar	305- at (	992-8480
(Name of Contact Person)		le & Daytime Telephone Number)
Enclosed please find a check made payable  \$25 Filing Fee		Department of State for:  ng Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building		MAILING ADDRESS: Registration: Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle Tallahassee. Florida 32301



### 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)

The name of the limited liability company as it appears on the record of State is:  Hasroun Investments, LLC	ds of the Florida Department
2. The Florida document/registration number assigned to this limited li	ability company is:
3. The date this member/manager withdrew/resigned or will withdraw/	resign is:
4.1. Laba Skaf  (Print Name of Person Resigning), hereby withdraws	
Manager	
(Print Title)	_
of this limited liability company and affirm the limited liability comparesignation in writing.	any has been notified of my
MA	
Signature of Dissociating Member or Resigning Manager	ን ቁ ው

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)