

LB 0000 95918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

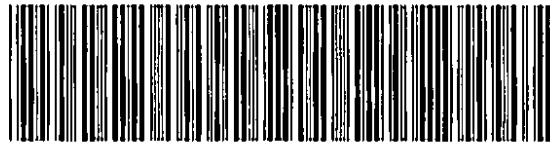
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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12/20/18--01022--016 \*\*55.00

FILED

2018 DEC 20 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CS  
1-7-19

YARIN HADAD  
YAR INVESTMENTS LLC  
2690 SOUTH STATE ROAD 7  
MIRAMAR, FL 33023  
(561) 900-6271

**Via FedEx**

December 19, 2018

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**Re:** Dissociation of Member, Manager from Florida LLC  
**Document Number:** L18000095918  
**Company Name:** YAR GROUP LLC

Dear Division of Corporation:

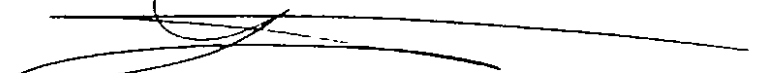
Enclosed, please find the following documents for your kind review and execution:

- 1) Cover Letter requesting resignation or dissociation of a LLC member;
- 2) Dissociation/Resignation of Member, Manager from Florida Limited Liability Company;
- 3) Check in the amount of \$55.00 for the Filing Fee and Certified Copy Production.

Please be advised that I, Yarin Hadad, never signed any paperwork to be associated with the above-named Limited Liability Corporation. The contact information listed on the Entity Name Details is not my address, nor have I ever been associated with that address. My name was added to this corporation without my consent. I am the Manager of another corporation, with a similar name, YAR INVESTMENTS LLC (Entity Details Attached), and believe my name was added to YAR GROUP LLC in a deceitful manner. As such, I wish to be removed from any association with this corporation as soon as possible. Kindly send confirmation of the dissociation to the address listed above and enclosed on the documents.

Please feel free to contact me should you require any further information.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Yarin Hadad', with a long horizontal stroke extending to the right.

Yarin Hadad

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** YAR GROUP LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

YARIN HADAD

(Contact Person)

GURU AUTO SALES

(Firm/Company)

2690 South State Road 7

(Address)

Miramar, FL 33023

(City/State and Zip Code)

For further information concerning this matter, please call:

YARIN HADAD

(Name of Contact Person)

at ( 561 ) 900-6271

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

■ \$55 Filing Fee & Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



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 limited liability company as it appears on the records of the Florida Department of State is: YAR GROUP LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L18000095918

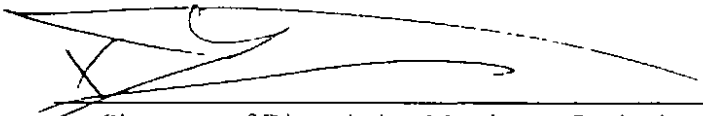
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/19/2018

4. I, YARIN HADAD, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MANAGER

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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