L05000026847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Resignation
Theis
7-2-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HAVANA CLUB ENTERPRISES, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L05000026847

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria Masse
Name of Person

BizFilings
Name of Firm/Company

8040 Excelsior Drive Suite 200
Address

Madison, WI 53717
City/State and Zip Code

mmasse@bizfilings.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Masse at (608) 827-5300
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for $85.00 for an active limited liability company or $25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

FILED
09 JUN 29 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Business Filings Incorporated , hereby resigns as
Name of Registered Agent

Registered Agent for HAVANA CLUB ENTERPRISES, LLC
Name of Limited Liability Company

L05000026847
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Brenna Moriarty
Signature of Resigning Agent

If signing on behalf of an entity:

Brenna Moriarty
Typed or Printed Name

Asst. Secretary for Business Filings Incorporated
Capacity

FILING FEES:

$ 85.00	Active limited liability company
$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17 (08/05)