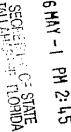


(Re	equestor's Name)	
(Ac	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		391
	Office Use Only	, ,)



05/01/06--01027--005 **25.00



COVER LETTER

COVE	R LEITER
TO: Registration Section Division of Corporations	
SUBJECT: ENIGNA CIG	AR COMPANY d/b/a Perfeccion
Dear Sir or Madam:	_
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this r	matter to the following:
DEBRA J. Filik (Name of Person)	
(Firm/Company) 4921 TRADEWINDS (Address) FORT LAUderdale F1 (City/State and Zip Code)	TER. 33312
For further information concerning this matter, pl	ease call:
Debra Filik (Name of Person)	at (754) 204-2554 or 954- (Area Code & Daytime Telephone Number)
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
Enclosed is a check for the following amount:	

\$55 Filing Fee & Certified Copy

\$25 Filing Fee

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Debat T. Filik, hereby resign as MANAGING BETWEE MEMBER
of ENIGMA Cigar Company dbla Perfeccion
a limited liability company organized under the laws of the State of Horida
and affirm that the limited liability company has been notified in writing of the resignation.
Kelva J
(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

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

CR2E079 (8/05)

ENIGNA CIGAR CO DOC#

DOCUMENT # LOS 000074139

Perfeccion Fictions Name Document

Document # G05213900289