

L12000073417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

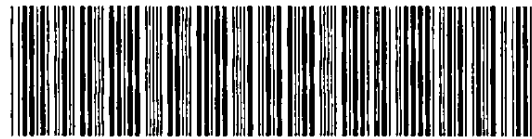
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100300326341

100300326341
05/23/17--01029--029 **25.00

FILED
17 JUN 23 PM 12:38
CLERK OF DISTRICT COURT
CLERK OF DISTRICT COURT
CLERK OF DISTRICT COURT

S. WARREN

JUN 26 2017

3

TO: Registration Section
Division of Corporations

SUBJECT: COLD PRESSED RAW BEVERAGES 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:

Ira Cohen, Esq.

(Contact Person)

HENKEL & COHEN, P.A.

(Firm/Company)

7480 S.W. 40TH STREET, SUITE 450

(Address)

MIAMI, FL 33155

(City/State and Zip Code)

For further information concerning this matter, please call:

Ira Cohen, Esq.

(Name of Contact Person)

305 971-9474
at ()

(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: COLD PRESSED RAW BEVERAGES LLC

2. The Florida document/registration number assigned to this limited liability company is:
L12000073417

3. The date this member/manager ~~withdrew/resigned or will withdraw/resign~~ is: 06/01/2012

4. I, Federico Intriago, dissociates am not, and never was an ~~hereby withdraw/resign as a~~

(Print Name of Person Resigning)

Authorized Member

(Print Title)

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

Federico Intriago

Signature of Dissociating Member ~~or Resigning Manager~~

by: Ina Cohen, Esq., Legal Counsel
for Mr. Intriago.

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

* Note: This individual never was associated with this entity. Sunbiz initially listed him as a Member.