

L12000098247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

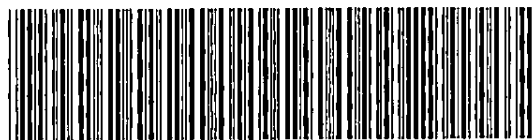
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED 2023 APR 14 11:25 AM

STATE
TAX COLLECTOR

2023 APR 14 AM 7:12

FILED

6/20/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sindicato Cigar 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:

Kevin G Bennett
(Contact Person)

Bennett Law Firm, LLC
(Firm/Company)

301 W. Atlantic Ave. Ste. O-8
(Address)

Delray Beach, FL 33444
(City/State and Zip Code)

For further information concerning this matter, please call:

Kevin G. Bennett at (561) 276-9343 x1. 101
(Name of Contact Person) (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

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2023 APR 14 AM 7:12

FILED STATE
TALLAHASSEE, FL

**DISSOCIATION OR RESIGNATION OF [REDACTED], 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: Sindicato Cigar Group, LLC

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

L12000098247

3. The date this [REDACTED]/manager [REDACTED]/resigned or will [REDACTED] resign is: January 17, 2023

4. I, Ibrahim R. Dababneh, hereby [REDACTED]/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 [REDACTED] Resigning Manager

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