## L12000134836

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





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07/28/14--01051--003 \*\*55.00

FILED

14 JUL 28 PH IO: 20

SECRE FARY OF STATE

(1M 8-12-14

## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Mr. Hookah LLC			
(Name of Limi	ited Liability C	ompany)	
The enclosed member, resignation or dissocia	ation and fee	e(s) are submitted for filing.	
Please return all correspondence concerning	this matter to	o:	
Wissam Bahloul			
(Contact Person)			
			14 JL 41
(Firm/Company)	Market Service		4 JUL 28 PH 10: 20
(Address)			M IO: 20
(City/State and Zip Code)		<u> </u>	
For further information concerning this matter	er, please cal	1:	
Wissam Bahloul	813	731-1333	
(Name of Contact Person)	- \-	de & Daytime Telephone Numb	ber)
Enclosed please find a check made payable to □ \$25 Filing Fee		Department of State for: ng Fee & Certified Copy	
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
· ·		Registration Section	
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327	
2661 Executive Center Circle		Tallahassee, Florida 32314	

CR2E079 (2/14)

Tallahassee, Florida 32301



## 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 of State is: Mr. I		s it appears on the records of the Florida Department
of State is:		
2. The Florida docu	ument/registration number a	ssigned to this limited liability company is:
L1200013483	6	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is: 07/01/2014
4. I, Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print N	lame of Person Resigning)	
MGRM		
<del>- , , , , , , , , , , , , , , , , , , ,</del>	(Print Title)	
of this limited lia resignation in wr	• • •	ne limited liability company has been notified of my
Pan	d Spen	
Signature of D	ssociating Member or Resig	gning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	