L13000004120

(Requi	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Na	me)
(Docu	ment Number	.)
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ing Officer:	

Office Use Only



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C. LEWIS

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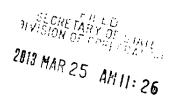
EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: HABANA KISS CURAN LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
EUSTACIO Machado (Contact Person)
HABANA KISS CUBAN LLC (Firm/Company)
54 E LAKE SHONE BUD (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
EUSTACIO MACHACO at (407) 922-2329 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\square\$\$ \$\squ
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

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the lin of State is: HA	mited liability company as i <u>U.4ルA (</u> / SS) C	t appears on the records of the CAFE	f the Florida Department 人んこ.	
	ty company was organized on idea.	under the laws of:		
3. The Florida docum	nent/registration number of (this limited liability comp	any is:	
	00004120		•	
4.1, Ricarda (Print Nam	D PENEZ ne of Person Resigning)	, hereby resign as a	HGNH (Print Title)	
	ity company and affirm the			
resignation in writing	ng.			
- UK				
Signature of Resigning Member, Managing Member or Manager				
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			