

L17 000 116898

(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



700256047717

01/31/14--01020--023 **50.00

J. Stivers FEB 04 2013

14 JAN 31 11:27
FALLMOUNTAIN STATE
FALLMOUNTAIN STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Huff & Puff Vapor Stuff, 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:

Ruben Urgell

(Contact Person)

Huff & Puff Vapor Stuff, LLC

(Firm/Company)

10804 SW 88 Street, #P-10

(Address)

Miami, FL 33185

(City/State and Zip Code)

For further information concerning this matter, please call:

Ruben Urgell

(Name of Contact Person)

at (305) 763-2287

(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

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Huff & Puff Vapor Stuff, LLC

2. The Florida document/registration number of this limited liability company is:
L13000116898

3. The date this member withdrew or will withdraw is: 1/1/2014

4. I, Christina C. Pons, hereby resign as a Member
(Print Name of Person Resigning) *(Print Title)*

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



Signature of Resigning or Dissociating Manager, Member

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

RECEIVED
TALLAHASSEE, FLORIDA
16 JAN 21 10 11: 27