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(ке	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	s of Status		
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Special Instructions to Filing Officer:				
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE NOV 1 4 2016

FILED

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Mingo Brand Liability Co	ompany)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:	:
Andre Dorsey (Contact Person)	_
Mingo Brand, LLC (Firm/Company)	_
19130 NW 10th Ct (Address)	
Miami Gardens, FL 33169 (City/State and Zip Code)	_
For further information concerning this matter, please call:	:
	e & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida last \$25 Filing Fee \$55 Filing	(V)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section For Division of Corporations P.O. Box 6327 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	limited liability	company as it appears on the reco	ords of the Florida Department
	•	Brand, LLC	
2. The Florida docu	ment/registratio	on number assigned to this limited	liability company is:
1600	01594	5L	
3. The date this mer	mber/manager v	vithdrew/resigned or will withdrav	v/resign is: 11 4 2016
	ume of Person Resi	igning)	w/resign as a
AMB	Print Title)	.	
of this limited liab resignation in wri		and affirm the limited liability com	npany has been notified of my SECRE FARY
Signature of Dis	sociating Mem	ber or Resigning Manager	res o
Filing Fee:	\$25.00 (Req \$30.00 (Onti	•	I: 05 TATE ORIDA