

120 000 189608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

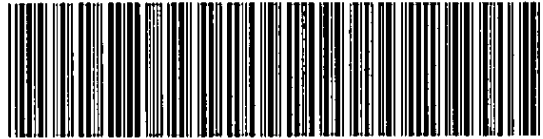
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JAN 12 PM 1:20

Registration

JAN 12 2022

1 ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sticky Fingers Screamery & Lounge 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:

Ahmad S. Raikan
(Contact Person)

Sticky Fingers Screamery & Lounge LLC
(Firm/Company)

19 Harrison Ave
(Address)

Panama City, FL 32401
(City/State and Zip Code)

For further information concerning this matter, please call:

Ahmad Raikan at (850) 960 9505
(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

RECEIVED

2022 JAN 12 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FL

December 16, 2021

AHMAD S. RAIHAN
19 HARRISON AVE
PANAMA CITY, FL 32401

SUBJECT: STICKY FINGERS SCREAMERY & LOUNGE, LLC
Ref. Number: L20000189608

We have received your document for STICKY FINGERS SCREAMERY & LOUNGE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the form in its entirety and you failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist III

Letter Number: 321A00030422



2022 11 12 PM 1:20

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 records of the Florida Department of State is: Sticky Fingers Scraps & Lounges LLC

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

L20000189608

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/01/2022

4. I, Moham D Mishu, hereby withdraw/resign as a
(Print Name of Person Resigning)

AMGR
(Print Title)

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

M. Bashaat Ullah
Signature of Dissociating Member or Resigning Manager

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