

L21000390117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

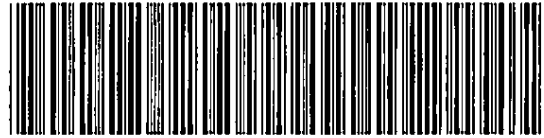
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400375388954

01/20/22--01001--014 \*\*55.00

RECORDED  
2022 JAN 19 PM 4:16  
FILED  
2022 JAN 19 AM 10:55  
HALL COUNTY CLERK  
HALL COUNTY, FLORIDA  
STATE OF FLORIDA  
CLERK OF SUPERIOR COURT

Y. SULKER

JAN 2 2022

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Cryptobilia 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:

Rami Harfouch

\_\_\_\_\_  
(Contact Person)

Cryptobilia LLC

\_\_\_\_\_  
(Firm/Company)

12716 Stamwyck Circle

\_\_\_\_\_  
(Address)

Tampa, FL, 33626

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Rami Harfouch

813

240 - 5443

at ( )

\_\_\_\_\_  
(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

**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: Cryptobilia LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L21000390117

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/18/2022

4. I, Luis Vento, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Director  
(Print Title)

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

DocuSigned by:

Luis Vento

27E990587E7429...

Signature of Dissociating Member or Resigning Manager

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

FILED  
2022 JAN 19 AM 10:56  
DIVISION OF STATE  
CORPORATIONS, FL