

L22 00000 7664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

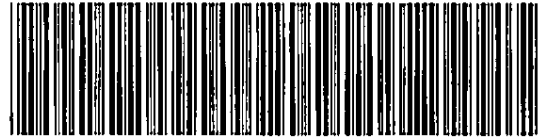
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2022 JUN 21 AM 7:55
CLERK OF COURT
FALLAHASSEE, FLORIDA

SEP - 9 2022

S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

Braja International LLC

SUBJECT: _____
(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:

Michael Tarrab

(Contact Person)

Braja International LLC

(Firm/Company)

3610 Yacht Club Dr., #1413

(Address)

Aventura, FL. 33180

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Tarrab

305

401.8823

(Name of Contact Person) at _____
(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

2022 JUN 21 AM 7:55
FALL ARLASSE, FLORIDA

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: Braja International LLC
2. The Florida document/registration number assigned to this limited liability company is: AMBR
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5/2/2022
4. I, Alexander Assa, hereby withdraw/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.

DocuSigned by:
[Signature]
CS487E51A2B5412

Signature of Dissociating Member or Resigning Manager

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