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2/A Resignation

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Jadda International Fund, LP			
(Name of Limited Partnership or Limited Liability Limited Partnership)			
DOCUMENT NUMBER: A0400001600			
The enclosed Resignation of Registered Agent and	fee(s) are submitted for filing.		
Please return all correspondence concerning this m	atter to:		
Joseph R. Panzl, Esq.			
(Contact Person)			
Panzl & Company, P.A.			
(Firm/Company)			
PO Box 1984			
(Address)			
Winter Park, FL 32790-1984			
(City, State and Zip Code)			
For further information concerning this matter, plea	ase call:		
Joseph R. Panzl, Esq.	407 ₁ 629-9100		
(Name of Contact Person)	407 629-9100 Area Code and Daytime Telephone Number)		
Enclosed is a check made payable to the Florida Department of State for:			
☑ \$87.50 Filing Fee ☐ \$140.00 (\$87.50 Filing	ng Fee and \$52.50 Certified Copy Fee)		
STREET ADDRESS:	MAILING ADDRESS:		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
Clifton Building	P. O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314		

INHS16 (01/06)

RESIGNATION OF REGISTERED AGENT FOR LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Pursuant to the provisions of section 620.1116, Florida Statutes, the under	ersigned,
Joseph R. Panzl, Esq.	_, hereby resigns as
(Name of Registered Agent)	
Registered Agent for Jadda International Fund, LP (Name of Limited Partnership or Limited Liability)	Limited Partnership)
A0400001600	
(Florida Document Number, if known)	
The agent is terminated on the 31 st day after the date on which this the Florida Department of State. Signature of Registered Agent If signing on behalf of an entity:	statement is filed by
	OB SE FAL
Typed or Printed Name	08 OCT -6 SECKE JAK
Capacity	-6 PM 1:34 ARY OF STATE ASSEE, FLORIDA

Filing Fee: \$87.50 Certified Copy (optional): \$52.50