## 101000019406

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

TO:	Registration Section Division of Corporations				
	DIVIS	non of Corporations			
SUBJ	ECT:	CCT: NASAKI INTERNATIONAL LLC (Name of Limited Liability Company)			
The er	nclosed	d member, resignation or dissocia	ation and fee(	s) are submitted for filing.	
Please	return	all correspondence concerning	this matter to:		
GUIL	LERM	IO KIUHAN			
		(Contact Person)	<del> </del>	<del>-</del>	
NASA	AKI IN	TERNATIONAL LLC			
-		(Firm/Company)		_	
1472	NIM/ 1	53RD AVENUE			
	1444			_	
		(Address)			
РЕМІ	BROK	E PINES, FLORIDA 33028			
		(City/State and Zip Code)		_	
For fu	rther in	nformation concerning this matte	er, please call:		
GUIL	LERM	O KIUHAN ame of Contact Person)	954	610-4531	
	(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)	
		ase find a check made payable to g Fee			
		OURIER ADDRESS:		MAILING ADDRESS:	
_		Section		Registration Section	
		Corporations		Division of Corporations	
	n Build Exacut	ling ive Center Circle		P.O. Box 6327	
		Florida 32301		Tallahassee, Florida 32314	

CR2E079 (2/14)



## 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)

The name of the limited liability company as it a     of State is:	
2. The Florida document/registration number assig L01000018406	ned to this limited liability company is:
3. The date this member/manager withdrew/resigno	ed or will withdraw/resign is: MAY 31, 2019
4. I, FUAD KIUHAN  (Print Name of Person Resigning)	_, hereby withdraw/resign as a
MGR	
(Print Title)	
of this limited liability company and affirm the line resignation in writing.	mited liability company has been notified of my
Tol The	
Signature of Dissociating Member or Resigning	g Manager

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)