	• • •		
~	LOS	200000772	7

- - -

- . --

i...

- .

	Austoria Nama	
- CHOSKI	ins XSJ.1 Gven,G	1 ⁹ -JIr
West to	bren, G	- /* 13
	Ob	64 —
(Ci	ty/State/Zip/Phone	e #)
PICK-UP		
/D;	isiness Entity Nar	
(6)	isiness Entity Nar	ne)
(Dc	ocument Number)	<u></u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1
	- -	
	Office Use Onl	
•	4	
* [*]		
:		
	· · [*]	



07/18/05-01012-020 **25.00

•



RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

hereby resign as (Title) of (Limited Liability Company) a limited liability company organized under the laws of the State of

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

(Signature of resigning manager, managing member or member)

7/3/3 Elyhth Dullin Comm Expire 5/2010

٩

,7

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

