# L02000007873

(Re	equestor's Name)				
(Address)					
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. (Ci	ty/State/Zip/Phone	e #)			
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SECRETARY OF STATE



#### **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: FANO ONE LLC.					
(Name of Limited Liability Company)					
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to:					
JOSE E. FANO					
(Contact Person)					
FANO ONE LLC.					
(Firm/Company)					
2189 WEST 60TH STREET SUITE #205  (Address)					
(Address)					
HIALEAH, FLORIDA 33016					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
JOSE E. FANO at ( 305 ) 556-4282					
(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 \$ Certified Copy					
STREET/COURIER ADDRESS: MAILING ADDRESS:					
Registration Section Registration Section Division of Corporations Division of Corporations					
Clifton Building P.O. Box 6327					
2661 Executive Center Circle  Tallahassee, Florida 32314  Tallahassee, Florida 32301					

CR2E079 (5/06)



### FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

#### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as NO ONE LLC.	it appears on the records	of the Florida Department
2. This limited liab	oility company was organized	under the laws of:	
3. The Florida doc <u>L0200000</u>	ument/registration number of 7873	this limited liability con	npany is:
4. I, TANIA FANO		, hereby resign as a	MANAGER
(Print Name of Person Resigning)		, v v <b>,</b> v g	(Print Title)
resignation in wr	r Jaces.	·	ny has been notified of my
Signature of Res	igning Member, Managing M	ember or Manager	
_	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		