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C. LEWIS

AUG 2 4 2009

EXAMINER

COVER LETTER

CR2E079 (5/06)

TO: Registration Section		
Division of Corporations		
SUBJECT: VLAHOS MSJS LLC	The Comment of the Co	
(Name of Limited Liabi	itty Company)	
The enclosed member, managing member or manage filing.	er resignation and fee(s) are submitted for	
Please return all correspondence concerning this mat	ter to:	
SOTIRIOS VLAHOS		
(Contact Person)		
VLAHOS MSJS LLC		
(Firm/Company)		
5760 NW 72nd WAY		
(Address)		
PARKLAND, FL. 33067		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
SOTIRIOS VLAHOS at (9	54 ₎ 759-1106	
(Name of Contact Person) (Area	a Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Fig	orida Department of State for:	
\$25 Filing Fee	\$55 Filing Fee &	
<u> </u>	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 32301	Tallahassee, Florida 32314	



FLORIDA DEPARTMENT OF STATE

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

DIVISION OF CORPORATIONS

1. The name of the of State is: VL/	limited liability company as AHOS MSJS LLC	it appears on the records of the Florida Department
2. This limited liab FLORIDA	ility company was organized	under the laws of:
3. The Florida docu <u>L0300004</u>	•	this limited liability company is:
4. I, JEFFREY	VLAHOS	, hereby resign as a MANAGER
•	ame of Person Resigning)	(Frim Tine)
resignation in wri	iting.	e limited liability company has been notified of my
Filing Fee:	gning Member, Managing M \$25.00 (Required)	ember of Manager
Certified Copy:	\$30.00 (Optional)	