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J. SAULSBERRY EXAMINER

ner 12 2012

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Pasha's Management LLC (Name of Limited Liability Company)		
The enclosed member, managing member or manager resignation and fee(s) are submit filing.	ted for	
Please return all correspondence concerning this matter to:		
Abigail Watts-Fitzgerald (Contact Person)		
40 Weiss Serota Helfman, et al.	2012 DEC	
2525 Ponce de Leon Blud, ste 700 (Address)	2012 DEC 10 AT STATE	
Coral Gables FL 33/34 (City/State and Zip Code)	STATE	?
For further information concerning this matter, please call:		
Abig 41 U9+15-17+25 erald at (305) 854-0800 (Name of Contact Person) (Area Code & Daytime Telephone Number	er)	
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	1	

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the	limited liability com	pany as it a	appears on the reco	rds of the Flor	ida Departmo	ent
of State is:	Pasha's	Ma	ragement	LLC	7. 2	_•
2. This limited liab	ility company was or		nder the laws of:		SECRETARY OF STATE	
3. The Florida docu	ument/registration nu	mber of th	is limited liability o	company is:	RAIE	?" 2
Lo	4000000	1891	•		35	
4. I, // // (Print N	olas Cort	Les	, hereby resign as	sa <u>Offic</u> Prin	e//Mc nt Title)	<u>1</u> 195e
of this limited lia resignation in wr	bility company and a iting.	ffirm the li	imited liability com	pany has been	notified of n	ny
	if LA					
Signature of Res	igning Member, Man	aging Men	nber or Manager			
Filing Fee:	\$25.00 (Required	1)				
Certified Copy:	\$30.00 (Optional)				