

LO4000054517

(Requestor's Name)

(Address)

(Address)

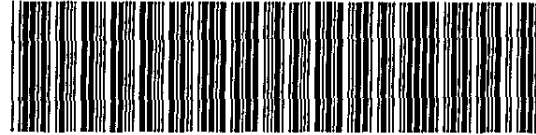
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

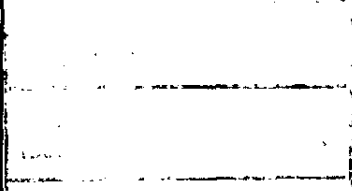
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FILE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 99 CENT SUPERSTORE LLC
(Name of Corporation)

DOCUMENT NUMBER: L04000054517

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAUL FELDMAN
(Name of Person)

PAUL FELDMAN, PA
(Name of Firm/Company)

407 LINCOLN ROAD, SUITE 701
(Address)

MIAMI BEACH, FL 33139
(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL FELDMAN at (305) 534-4721
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

SECRETARY OF STATE
TALLAHASSEE, FL
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FILED

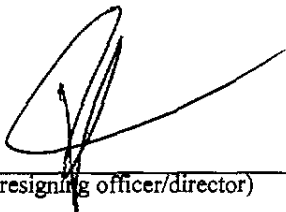
RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, AMRAM ADAR, hereby resign as MANAGER
(Title)

of 99 CENT SUPERSTORE LLC
(Name of ~~Corporation~~ *Limited Liability Company*)

L04000054517, a ~~corporation~~ organized under the laws of the State of
(Document Number, if known)

FLORIDA.



(Signature of resigning officer/director)

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**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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