## 604000054886

Mian Jones
(Requestor's Name)  420 Autrey Avenue V (Address)
Jacksmille, H. 3
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
· ·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600039471286

08/03/04--01008--001 \*\*25.00

104-54884

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, NIAM JONES, hereby resign as MGR (Title)		_	
of CHANTELLE. NICHOLE LLC. (Limited Liability Company)		<b></b>	
a limited liability company organized under the laws of the State of FLORIDA		<b></b> ->	
and affirm that the limited liability company has been notified in writing of the resign.	ation.		
(Signature of resigning manager, managing member or member)			
		-:	į

## FILING FEE IS \$25.00

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