105000054197

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Consisting to the Ellin Com			
Special Instructions to Filing Officer:			
,			





600135537836

09/15/08--01031--019 **55.00

SEGRETARY OF STATE

T. CLINE

SEP 16 2008

EXAMINER

COVER LETTER

Registration Section TO: **Division of Corporations** SUBJECT: QUIROX INTERNATIONAL 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: RICO ORTIZ (Contact Person) OZ-MAR ENTERPRISES, LLC (Firm/Company) 13901 SW 279TH, LANE (Address) HOMESTEAD, FL. 33032 (City/State and Zip Code) For further information concerning this matter, please call: RICO ORTIZ (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee **✓** \$55 Filing Fee & **Certified Copy** STREET/COURIER ADDRESS: **MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations**

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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	- -	of the Florida Department
2. This limited liab	oility company was organized	l under the laws of:	
3. The Florida doc 	ument/registration number of	f this limited liability comp	any is:
4. I, ERIKA QL	JITIAN	, hereby resign as a _	MGR
	ame of Person Resigning)	······································	(Print Title)
resignation in wr	bility company and affirm the iting. Julian Bring Member, Managing N		has been notified of my
•	\$25.00 (Required) \$30.00 (Optional)		