# L05000064921

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SECALISATE FLORIDA
TAILANTASSEE FLORIDA

#### **COVER LETTER**

Division of Corporations	
SUBJECT: ABRAHAM-NIMR) (Name of Li	Y, LLC imited Liability Company)
The enclosed member, managing member of filing.	or manager resignation and fee(s) are submitted for
Please return all correspondence concernin	g this matter to:
Christian Abraham (Contact Person)	· · · · · · · · · · · · · · · · · · ·
Abraham-Nimry, LLC (Firm/Company)	<u> </u>
10556 NW 26th St Ste. D	0 101
Doral, Fl. 33172 (City/State and Zip Code)	<del>- La caractería de la </del>
For further information concerning this ma	tter, please call:
Christian Abraham	_at (_305) 629 8191
(Name of Contact Person)  Enclosed please find a check made payable  √ \$25 Filing Fee	(Area Code & Daytime Telephone Number)  to the Florida Department of State for:  \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



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SECHETARY OF STATE TALLAHASSEE, FLORIDA

### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as RAHAM-NIMRY, L	it appears on the records of the Florida Departi	nent 
2. This limited liabili Florida	ty company was organized	under the laws of:	
3. The Florida docum L05000064		this limited liability company is:	
4. I. Christian (	Gafter	, hereby resign as a Mgr.	
(Print Nan	ne of Person Resigning)	(Print Title)	_
resignation in writing		limited liability company has been notified of	`my

Certified Copy:

\$30.00 (Optional)