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SECKETARY OF STATE

S. HAWKES FEB 2 6 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Lemono Name Ascan LL (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:
Dimple L Descri (Contact Person)
Shee Quantralayan CCC
19201 Sencarlos RTVd,
Feetry ey, fr -3393] (City/State and Zip Code)
For further information concerning this matter, please call:
Dimple Roese) at (239) 233-7368 (Name of Contact Person) (Area Code & Daytime Telephone Number)
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 P.O.:Box 6327 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations P.O::Box 6327 Tallahassee, Florida 32314

Tallahassee, Florida 32314

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

	limited liability company as it appears on the records of the Florida Department
of State is:	Shore Suammalayan Le
2. This limited liab	pility company was organized under the laws of:
	ument/registration number of this limited liability company is:
4. I, Dimol	lame of Person Resigning), hereby resign as a Mark (Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
<u> </u>	Desa'
Signature of Res	igning Member, Managing Member or Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)