

L05000081849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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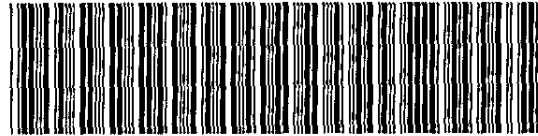
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN OCT 14 2005

J. BRYAN OCT 10 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TERA ASRA LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JASMINE UBEROI
(Name of Person)

TERA ASRA LLC
(Firm/Company)

9495 S. ORANGE BLOSSOM TRAIL
(Address)

ORLANDO FL 32837
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JASMINE UBEROI at (321) 228-2344
(Name of Person) (Area Code & Daytime Telephone Number)

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 10, 2005

JASMINE UBEROI
TERA ASRA LLC
9495 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

SUBJECT: TERA ASRA LLC
Ref. Number: L05000081849

We have received your document for TERA ASRA LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 705A00061471

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, NAMRATA K. UBEROI, hereby resign as MANAGING MEMBER
(Title)

of TERA ASRA LLC,
(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida,

and affirm that the limited liability company has been notified in writing of the resignation.

Namrata Uberoi

(Signature of resigning manager, managing member or member)

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TALLAHASSEE, FLORIDA

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