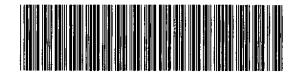
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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C. LEWIS

DEC 0 12008

EXAMINER

COVER LETTER

for

Tallahassee, Florida 32314

Division of Corporations
SUBJECT: Nica Creations, LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted filing.
Please return all correspondence concerning this matter to:
Melissa Wolfson (Contact Person)
Nica Creations, LLC (Firm/Company)
16705 Eagle Oak Pr.
Odessa, FL 33556 (City/State and Zip Code)
For further information concerning this matter, please call:
MeliSSa Wolfson at (813) 892-9089 (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 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

CR2E079 (5/06)

2661 Executive Center Circle Tallahassee, Florida 32301



FILED

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SEURETARY 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	y as it appears on the records	of the Florida Department
	ty company was organi Hed Liability		
3. The Florida docum	<u> </u>	er of this limited liability com	pany is:
	ne of Person Resigning) ity company and affirm	, hereby resign as a _	, ,
Melissa Signature of Resign	ing Member, Managin	g Member or Manager	
Filing Fee: Certified Copy:	` ' '		