## 105000104771

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D. BRUCE

SEP 23 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: JLN Foods, LLC (Name of Limited Liability Company)			
The enclosed member, managing member or manager resignation and fee(s) are submfiling.	iitted	for	
Please return all correspondence concerning this matter to:			
Lacrimioara Mundreanu (Contact Person)			
JLN Foods LLC (Firm/Company)	ennet Program		
711 S. Broad St. (Address)	SECRETAR	10 SEP 22 PH 瞬	<u></u>
Brooksville, F1 34601 (City/State and Zip Code)	RETARY OF STATE	2 PH 配	
For further information concerning this matter, please call:		යා	
Lacrimi vara (Lily) Mundrean u at (352) 796-7722  (Name of Contact Person) (Area Code & Daytime Telephone Number	ber)		
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$ Certified Copy			
STREET/COURIER ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP.O. Box 63272661 Executive Center CircleTallahassee, Florida 3231Tallahassee, Florida 32301	.4		

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Flor of State is:	ida Depa	ırtmei	nt
2. This limited liability company was organized under the laws of:  Florida	SECKETAR TALLAHASS	10 SEP 22	7
3. The Florida document/registration number of this limited liability company is:	Y OF STATE EE. FLORIDA	PM 骤 1-3	
4. I, <u>Toan Mundreanu</u> , hereby resign as a <u>MGR</u> (Print Name of Person Resigning) (Print Name of Person Resigning)	M nt Title)		
of this limited liability company and affirm the limited liability company has been resignation in writing.	notified	of m	у
Signature of Resigning Member, Managing Member or Manager			
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)			