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EXAMINER

SECRETARY OF STATE
TALL ABASSEF FLORIDS

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COVER LETTER

CR2E079 (5/06)

| TO: Registration Section Division of Corporations | |
|---|------------------|
| SUBJECT: A. J. Auto Repair LLC (Name of Limited Liability Company) | İ |
| The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. | |
| Please return all correspondence concerning this matter to: | ** |
| Jacquelyn Jilani (Contact Person) | |
| (Firm/Company) | ļ |
| 12609 Kentwood Ave. | |
| Ft. Myers, Fl. 33913 (City/State and Zip Code) | į |
| For further information concerning this matter, please call: | |
| Tacquelyn Jilani at (239) 565-1465 (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 \$55 Filing Fee & | 3 5 7 0 |
| Contifod Conv | |
| STREET/COURIER ADDRESS: MAILING ADDRESS: | ٠ |



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 Florida Department of State is: A.J. Auto Repair, LLC. |
|--|
| 2. This limited liability company was organized under the laws of: Florida |
| 3. The Florida document/registration number of this limited liability company is: LOGOOO43549 4. I, Jacquelyo Jilani, hereby resign as a MGRM4 |
| of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. |
| Signature of Resigning Member, Managing Member or Manager |
| Filing Fee: \$25.00 (Required) |

Certified Copy:

\$30.00 (Optional)