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(Re	equestor's Name)	<u> </u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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G. MCLEOD

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**EXAMINER** 



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SECRETARY OF SIGHT

## NINA LOREN, LLC 13250 SW 72<sup>nd</sup> Avenue Miami, Florida 33150

(305) 670-4852 Telephone (305) 670-21/44 Facsimile

September 2, 2005

Registration Section DIVISION OF CORPÒRATIONS P. O. Box 6327 Tallahassee, FL 32314

RE: Nina Loren, LLC

Gentlemen:

Enclosed please find the following items pertaining to the abovementioned entity:

- Articles of Amendment to Articles of Organization, and cover letter;
- 2. Resignation of Member and cover letter;
- Resignation of Registered Agent and cover letter;

Also attached is a check in the amount of One Hundred Ninety Five (\$195.00) Dollars to cover filing fees, and certified copies of the changes.

Thank you for your anticipated cooperation.

Very truly yours,

Enclosures

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: NINA LOREN, (Name of Limited L	LLC iability Company)
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
ILIANA D. RUIZ (Contact Person)	
(Contact Person)	
(Firm/Company)	
13250 SW 72 AVENUE (Address)	<u></u>
Miami, FL 33156 (City/State and Zip Code)	
For further information concerning this matter, pl	ease call:
TLIANA D. RUIZ at ( (Name of Contact Person) (A	305 ) 720 - 4852 Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for:  \$55 Filing Fee & Certified Copy
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

CR2E079 (5/06)



#### FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

	ne limited liability company as it a	nppears on the records of	the Florida Dep	oartment 
2. This limited lia	ability company was organized un	der the laws of:		
	cument/registration number of the	is limited liability compa  —.	ny is:	
	I DOMINGUEZ  Name of Person Resigning) iability company and affirm the li			
resignation in w	esigning Member, Managing Mem	her or Manager		
Filing Fee:	\$25.00 (Required)	ioer or ivianager		80 SEVIO

Certified Copy:

\$30.00 (Required)