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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP		
(Bu	siness Entity Nam	ie)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	

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COVER LETTER

TO: **Registration Section** Division of Corporations

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SUBJECT: Millenia Park, 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:

Hazem Bata

(Name of Person)

(Firm/Company)

621 Knollwood Lane

(Address)

St. Augustine, FL 32086

(City/State and Zip Code)

For further information concerning this matter, please call:

Hazem Bata

(Name of Person)

at (904) 687-7668 (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Enclosed is a check for the following amount:

\$25 Filing Fee

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

✓ \$55 Filing Fee & Certified Copy

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

L SARANAC INVESTMENTS, LLC

, hereby resign as <u>member</u> (Title)

of Millenia Park, 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.

(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tailahoussee, FL 32314

CR2E079 (8/05)