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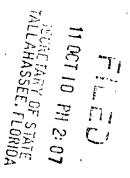
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· (City/S	State/Zip/Phone	#)	
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D. BRUCE

OCT 11 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 25, 2011

KANAN DONMEZ 6378 BOCA CIRCLE BOCA RATON, FL 33433

SUBJECT: HEALTHY DELIGHTS, L.L.C.

Ref. Number: L07000018017

We have received your document for HEALTHY DELIGHTS, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 711A00019906

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Hen thy Deligh	Liability Company)
The enclosed member, managing member or man filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Contact Person) Metrh	Basaran
(First/Community)	
(Firm/Company)	LLAH. LEGRE LEGRE
(Address)	NSSE
Boca Raton, FL 334 (City/State and Zip Code)	SSEE, FLORIDA
For further information concerning this matter, p	
(Name of Contact Person) at (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The course of 4th -	15344.15.1.154	'4 41	- Dansetssant
of State is:	Healthy Deligh Di	it appears on the records of the Florida	
	()		
2. This limited liab	ility company was organized		
	ument/registration number of	f this limited liability company.is:	
10100			N. Luc
4. I, <u>Kanan</u> ,	VOMMCZ Jame of Person Resigning)	, hereby resign as a Manalallag	itle)
of this limited lia resignation in wr		e limited liability company has been no	otified of my
į	Lom		
Signature of Res	gning Member, Managing M	1ember or Manager	Say.
			11 oc
Filing Fee:	\$25.00 (Required)		CT IC
Certified Copy:	\$30.00 (Optional)		NY OF
			T'S