## L07000093788

(Re	equestor's Name)	
	,	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
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	siness Entity Nar	ne)
(Do	cument Number)	
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. Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF SIMILAND AND ASSET FOR ROUGH

N. German FEB 1 2 2009

## **COVER LETTER**

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: 4IN 3 4AN (Name of Limited Liability Company)	· 
The enclosed member, managing member or manager resignation and filing.	ee(s) are submitted for
Please return all correspondence concerning this matter to:	
XIMENA GONZAUZ (Contact Person)	
MIN 4 YAN (Firm/Company)	
20185. E. COUNTRY CWB DR. (Address)	
#204, 1/20/City/State and Zip Code) 33180	
For further information concerning this matter, please call:	
XIMENA GONPALET at (786) 546 (Name of Contact Person) (Area Code & Daytime T	-0887 'elephone Number)
Enclosed please find a check made payable to the Florida Department of \$25 Filing Fee \$55 Filing Fee Certified	ee &
Registration SectionRegistrationDivision of CorporationsDivision ofClifton BuildingP.O. Box 60	Corporations



January 23, 2009

X IMENA GONZALEZ 20185 E. COUNTRY CLUB DRIVE #204 AVENTURA, FL 33180

SUBJECT: YIN Y YAN LLC Ref. Number: L07000093788

We have received your document for YIN Y YAN LLC 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) 245-6067.

Letter Number: 709A00002507

Neysa Culligan Regulatory Specialist II

Division of Cornerations - P.O. ROV 6397 Tallahassee Florida 39214





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it appears on the records of the Florida Department    IN + YAN LLC
2. This limited liab	lity company was organized under the laws of:
	ment/registration number of this limited liability company is:
· (Print No	A 6 ON TALET, hereby resign as a C.E.O (Print Title) oility company and affirm the limited liability company has been notified of my ting.
Signature of Resi	gring Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required)
Centiled Copy.	\$30.00 (Optional)