

LO7000110DS9

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

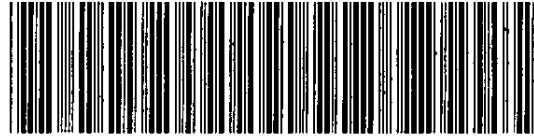
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300131225743

06/16/08--01009--007 **25.00

FILED
08 JUN 16 AM 11:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. O. G. JUN 17 2008

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ZAR COMMUNICATIONS LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

OSVALDO RODRIGUEZ
(Contact Person)

(Firm/Company)

154 W 18TH ST

(Address)

HIALEAH FL 33010
(City/State and Zip Code)

For further information concerning this matter, please call:

OSVALDO RODRIGUEZ at (305) 491-7330
(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 & 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**



FILED

08 JUN 16 AM 11:32

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: ZAR COMMUNICATIONS 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:
L07000110059

4. I, OSVALDO RODRIGUEZ, hereby resign as a MGR
(Print Name of Person Resigning) *(Print Title)*

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)