W7000 22906

(Red	questor's Name)			
(Add	iress)			
(Add	dress)			
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(C:b	/Chata/7in/Dhana	- 40		
(City	//State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nam	ne)		
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Certified Copies Certificates of Status				
Special Instructions to F		1		
Special instructions to r	-ining Officer.			

Office Use Only



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SECRETARY OF STATE

LOT-122906

M. Thomas APR 1 1 2008

COVER LETTER

Division of Corporations	
SUBJECT: IC PIZZA LLC (Name of Limited L	iability Company)
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this	natter to:
M. HUSSAIN	
(Contact Person)	SECOND TO
JC PJ22A (Firm/Company)	
(rimicompany)	A OF S
5749 W. JRLO BROWSON ME. (Address)	OB APR 10 AN 10: 16 SECRETARY OF STATE TALLAHASSEE FLORIDA
KSSSFMMC6 FL 34746 (City/State and Zip Code)	·
For further information concerning this matter, pl	ease call:
	401) 787-3422
(Name of Contact Person) (A Enclosed please find a check made payable to the \$25 Filing Fee	Area Code & Daytime Telephone Number) 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

	mited liability company as i	t appears on the recor	rds of the Florida	Departn	nent
2. This limited liabili FLOREDA	ty company was organized	under the laws of:		SECRETAR'S	08 APR 10
3. The Florida docum	nent/registration number of 22906	this limited liability c	ompany is:	OF STATE	AM 10: 16
,	ne of Person Resigning) lity company and affirm the ng.		(Print T	itle)	my
Signature of Resign	ning Member, Managing Mo	ember or Manager	2008		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				