L07000122930

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone i	#)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	·
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r	Office Use Only	



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LLC m/m/Rer

12-3-14°

COVER LETTER,

TO: Registration Section Division of Corporations		
SUBJECT: Nishat Enterprise L.L.C.		
(Name of Limit	ted Liability Cor	mpany)
The enclosed member, resignation or dissocia	tion and fee(s	s) are submitted for filing.
Please return all correspondence concerning t	his matter to:	
Mohammad Sheikh	,	_
(Contact Person)		_
Nishat Enterprise LLC		_
(Firm/Company)		
1215 Creighton Road		_
(Address)		
Pensacola, FL 32504		
(City/State and Zip Code)		_
For further information concerning this matter	r, please call:	
Mohammad Sheikh	954 at (854-1347
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee		Department of State for: 3 Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section Division of Corporations
Division of Corporations Clifton Building		P.O. Box 6327
2661 Executive Center Circle		Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (2/14)



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TO THE OFF

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as	it appears on the records of	f the Florida Department				
of State is:	nat Enterprise L.L.C.		•				
2. The Florida doc L0700012293	ument/registration number as	ssigned to this limited liabili	ity company is:				
		•					
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resig	gn is:				
4. I, Nishat Enter	prise Tame of Person Resigning)	, hereby withdraw/resign as a					
MGRM							
	(Print Title)						
of this limited lia resignation in wr	bility company and affirm th	e limited liability company	has been notified of my				
Mohd	Ali Shieka						
Signature of Di	ssociating Member or Resig	ning Manager	罗维 孝				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30:00 (Optional)		NOV 18 PH 4: 0				