# L08000012290

(Requestor's Name)			
(Address)			
(Address)			
(0) (0) 17 (0)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
A. LUNT			

OCT - 5 2009

**EXAMINER** 

Office Use Only

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09/10/09--01036--011 \*\*35.00



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2009

KAI HESSEMER 1401 SOUTH OCEAN BLVD. APT 411 THE MAYFAIR BOCA RATON, FL 33432

SUBJECT: CARS INTERNATIONALE, LLC

Ref. Number: L08000012290

This will acknowledge receipt of your correspondence which is being returned to the following reason(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 your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please sall (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 809A00030617

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Lars Internation (Name of Limited)	Phale, LL C Liability Company)	
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are so	ubmitted for
Please return all correspondence concerning this	matter to:	
Wai Hessenw (Contact Person)		
(Contact Person)  Lary Internationale, 1  (Firm/Company)	Lu	SECRETARY TALLAHASSEE
Clo RMI 160 W. Lamino 7	Zeal PWP 161	Y OF STATE EE, FLORID
Bola Raton, Florida 3 (City/State and Zip Code)	7432	
For further information concerning this matter, p	please call:	
Ruben Verdes at (Name of Contact Person)	(305) 505-30 (Area Code & Daytime Telephone N	62 Number)
Enclosed please find a check made payable to the \$25 Filing Fee	te Florida Department of State for \$55 Filing Fee & Certified Copy	<b>:</b>
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 3	ons

Tallahassee, Florida 32301

CR2E079 (5/06)



### 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 lin	mited liability company as it appears on the records of the Flo	orida Departme	nt
2. This limited liabili	ity company was organized under the laws of:	2009 OCT -2 SECRETARY O TALLAHASSEE	200
	nent/registration number of this limited liability company is: 12290 / 262620422	PM 2: 48 OF STATE OF FLORIDA	
4. I, Vai H (Print Nan		int Title)	NORM
of this limited liabil resignation in writing	lity company and affirm the limited liability company has been	n notified of m	у
Signature of Resign	ning Member, Managing Member or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		