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D. BRUCE

AUG 24 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	ECT: FOOD ZONE EQUITES, (Name of Limited)		omnany)			
	(Name of Limited	I Liability C	ompany)			
The enfilling.	nclosed member, managing member or m	anager res	ignation and fee(s) are subn	nitted f	or	
Please	e return all correspondence concerning thi	is matter to):			
SHA	ABEER SHEKHA					
**	(Contact Person)					
FOC	DD ZONE EQUITES, LLC				10	
	(Firm/Company)			AHA TARA	AUG	
2760	SW 126TH WAY			ARY:	0 AUG 23	
	(Address)				PΜ	
MIR	AMAR, FL - 33027	•		STATE	1:13	
	(City/State and Zip Code)			Þ		
For fu	orther information concerning this matter,	please cal	l:	•		
SHA	ABEER SHEKHA a	_{t (} 954	₎ 554-2909			
	(Name of Contact Person)	(Area Coo	le & Daytime Telephone Num	ber)		
Enclos	sed please find a check made payable to t \$25 Filing Fee		Department of State for: \$55 Filing Fee & Certified Copy			
STRE	EET/COURIER ADDRESS:		MAILING ADDRESS:			
_	tration Section		Registration Section			
	on of Corporations		Division of Corporations			
	n Building		P.O. Box 6327			
	Executive Center Circle assee, Florida 32301		Tallahassee, Florida 3231	14		

CR2E079 (5/06)



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 a OD ZONE EQUITIES, L		Florida Departr	nent
2. This limited liab	ility company was organized un FLORIDA	der the laws of: 	STERETAR TALLAHASS	10 AUG 23
3. The Florida doct L08000016	ument/registration number of thi	s limited liability company -		28 PM 1: 19
4. I, MOHAMM	ED M BAWANY ame of Person Resigning)	_, hereby resign as a V.P.	4.3	
	bility company and affirm the lin	mited liability company has	,	`my
Signature of Resi	gning Member, Managing Mem	ber or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			