## L0800006494/

(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:

A. LUNT

JUL 15 2008

**EXAMINER** 

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ	ECT: CANDAN SAKAOGLU LLC (Name of Limited Liability Con	npany)
The enfiling.	nclosed member, managing member or manager resig	gnation and fee(s) are submitted for
Please	return all correspondence concerning this matter to:	
ERI	HAN SAKAOGLU, ESQ. (Contact Person)	_
ER	HAN SAKAOGLU P.A. (Firm/Company)	ZDO JUL SECRETA TALLAHAS
270	1 WEST OAKLAND PARK BLVD (Address)	STA FLOR
OA	KLAND PARK, FL 33311 (City/State and Zip Code)	25 RIDA
For fu	rther information concerning this matter, please call:	
ERI	HAN SAKAOGLU, ESQ. at ( 954 (Area Code	
Enclos	sed please find a check made payable to the Florida I  \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
Regist Divisi Clifton	ET/COURIER ADDRESS: cration Section on of Corporations n Building Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



## 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		JAT 3S	lorida I	Department			
2. This limited liabiling FLORIDA	ity company was organized	under the laws of:	CRETARY OF STA	JUL Iц Р 2:				
3. The Florida document/registration number of this limited liability company is:  L08000064941								
4. I, CANDAN	SAKAOGLU ne of Person Resigning)	, hereby resign as a	MGR	M Print Titt	la)			
of this limited liabi resignation in writi	lity company and affirm the ng.  Nakovay	·	,		,			
Signature of Resign	ning Member, Managing Me	ember or Manager						
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)							