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(Requestor's Name)			
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(City/State/Zip/Phone #)			
(5.4) 5.500 (2.4)			
PICK-UP WAIT MAIL			
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(Business Entity Name)			
(DAN,			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer			
Special Instructions to Filing Officer:			

Office Use Only



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05/29/09--01027--008 **25.00



S. HAWKES

MAY 2 9 2009

EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations** The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: (Firm/Company) For further information concerning this matter, please call: enail Micheleshari@yahoo. Cm

at (______)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

STREET/COURIER ADDRESS:

8 \$25 Filing Fee

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

\$55 Filing Fee & Certified Copy

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		sit appears on the records of the Florida Department Staurats of Florida LLC.
	ility company was organized	l under the laws of:
T080	0006911	f this limited liability company is:
4. I, WICHEZ (Print N of this limited lial resignation in wr		menber marager , hereby resign as a
much	uh Porkes	
Signature of Resi	gning Member, Managing M	1ember or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	never syned to register this corporation or for any position