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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JAP Enterprises ULtd, LI	
(Name of Limited	d Liability Company)
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
Juan A. Perdomo	
(Contact Person)	·
JAP Enterprises ULtd, LLC	
(Firm/Company)	
13619 SW 286 Terrace	
Tee (Address)	
Miami, FL 33033	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Juan Perdomo	, _{t (} 786 ₎ 226-6790
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



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SECRETARY U. STATE TALLAHASSEE, FLORIDA

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 P Enterprises ULtd, LI		of the Florida Department		
	oility company was organized I lawful business	under the laws of:			
3. The Florida doc L0800009	ument/registration number of 2932	this limited liability comp	any is:		
_{4. I.} Milena Escobar		, hereby resign as a	, hereby resign as a MGRM		
(Print Name of Person Resigning)		,, ,	(Print Title)		
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability company	has been notified of my		
Signature of Res	igning Member, Managing M	ember or Manager			
Filing Fee:	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				