L08000/02588	
(Requestor's Name) (Address) (Address)	000156817780
(City/State/Zip/Phone #)	06/08/0901044026 **25.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 09 JUN-8 PH 2: 10 SECRETARY OF STATE TALLAHASSEE, FLORIDA
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	J. BRYAN JUN - 9 2009 EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: ZAN PARTNERS, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JORGE GARRIDO

Name of Person

ZAN PARTNERS, LLC Firm/Company

1300 STILLWATER DRIVE Address

MIAMI BEACH, FL 33141 City/State and Zip Code

GARRIDO1111@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Briansky

Name of Person

STREET/COURIER ADDRESS:

305)

Area Code & Daytime Telephone Number

389-7735

MAILING ADDRESS:

at (

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

Enclosed is a check for the following amount:

✓ \$25 Filing Fee

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

\$55 Filing Fee & Certified Copy





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 limited liability company as it appears on the records of the Florida Department of State is: ZAN PARTNERS, LLC
- 2. This limited liability company was organized under the laws of: Florida
- 3. The Florida document/registration number of this limited liability company is: L08000102588
- 4. I, <u>Michael Briansky</u>, hereby resign as a <u>Managing Member</u> (Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)



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