

2090000000120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

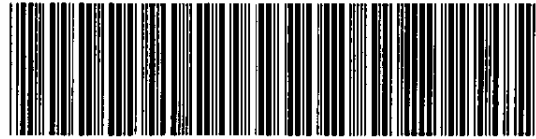
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400160977234

09/28/09--01011--014 **55.00

FILED
2009 SEP 28 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

SEP 29 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E.I. Parts, LLC.
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Adrian Ruiz
(Contact Person)

E.I. Parts, LLC.
(Firm/Company)

13850 SW 143 CT. Ste 16
(Address)

Miami, FL. 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

Adrian Ruiz at (305) 971-3556
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

☐ \$25 Filing Fee

☒ \$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

FILED
2009 SEP 28 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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: E.I. PARTS, LLC.

2. This limited liability company was organized under the laws of:
ANY AND ALL LAWFULL BUSINESS

3. The Florida document/registration number of this limited liability company is:
L09000000120

4. I, MADELEINE MULET, hereby resign as a MGR
(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: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
2009 SEP 28 PM 2:01
SECRETARY OF STATE
PALM HARBOR, FLORIDA