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C. LEWIS

MAY 2 6 2009

EXAMINER

#### **COVER LETTER**

Division of Corporations	
SUBJECT: LE+5 Nost, LLC (Name of Limited Liab)	ility Company)
The enclosed member, managing member or manage filing.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this man	tter to:
MARC KAHN (Contact Person)	
LET'S NOSH, LLC (Firm/Company)	
9850 SAN Jose Blvd (Address)	Svite 1
Tacksonville, FL 32257 (City/State and Zip Code)	<del></del>
For further information concerning this matter, pleas	se call:
MARC KAH J at (	407 468-1252 a Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flex \$25 Filing Fee	orida 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



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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

	mited liability company as it a	•	of the Florida Department
2. This limited liabili	ity company was organized und	der the laws of:	
	nent/registration number of this	s limited liability com	npany is:
of this limited liabi	lity company and affirm the lin		MANA GING MEMBER (Print Title) ny has been notified of my
	ng.  Low fell  hing Member, Managing Mem	ber or Manager	
Filing Fee: Certified Copy:	· • ·		