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SECRETARY OF STATE
SECRETARY OF STATE
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J. BRYAN

MAY 2 2 2009

**EXAMINER** 

## **COVER LETTER**

**TO:** Registration Section

Tallahassee, Florida 32301

CR2E079 (5/06)

Division of Corporations		
SUBJECT: ALAFIA AUTOS LLC		
(Name of Lin	nited Liability Company)	
The enclosed member, managing member of filing.	r manager resignation and fee(s) are submitted	for
Please return all correspondence concerning	this matter to:	
JANICE LAWRENCE		
(Contact Person)		
ALAFIA AUTOS LLC		
(Firm/Company)	72	SEC SEC
8504 SOUTH COUNTY RD 39	y 3	高三
(Address)		FILEU 09 MAY 21 PH 1:31 SECRETARY OF STATE
PLANT CITY, FLORIDA 33567		TES T
(City/State and Zip Code)		23
For further information concerning this matt	ter, please call:	D
JANCIE LAWRENCE	at ( 813 ) 317-6031	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to \$25 Filing Fee	to the Florida Department of State for:  \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	



## 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 AFIA AUTOS LLC	it appears on the records	s of the Florida	Depar	tment 	i
2. This limited liab FLORIDA	ility company was organized	d under the laws of:				
3. The Florida doce L0900036	ument/registration number o	f this limited liability con	mpany is:			
· · · · · · · · · · · · · · · · · · ·	N R LAWRENCE	, hereby resign as a	MGRM (Print To	itle)		•
	bility company and affirm th	e limited liability compa			of my	
Signature of Resi Filing Fee: Certified Copy:	gning Member, Managing N \$25.00 (Required) \$30.00 (Optional)	1ember or Manager		SECRETARY OF ST	09 MAY 21 PM 1:	TITU