L09000055779

(Requestor's Name)
(Address)
(Addiess)
(Address)
(City)Chata (7) (Dhana 49
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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A. LUNT
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SPORE TARY OF STATE TALLAHASSEE, FLORID,

1918 SEP 15 PM 3: 8

COVER LETTER

TO: Registration Section Division of Corporations	
•	
SUBJECT: Shawnie Platinum Services LLC	
(Name of Limited Liability Com	ipany)
The enclosed member, managing member or manager resignating.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Mark E. Rousso, Esq.	
. (Contact Person)	-
MARK E. ROUSSO, P.A.	2016 S SEGG TALLA
(Firm/Company)	HAGE TO THE TABLE
1000 E. Hallandale Beach Blvd., Suite B	SEGRETARY OF STATE
(Address)	
Hallandale Beach, FL 33009	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
Yolanda Katon at (954	, 668-2508
The little than the state of th	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$\$	Department of State for: S55 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)



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 it appearument Platinum Services Ll		s of the Florida Department
2. This limited liab	ility company was organized under t	he laws of:	TARY OF S MANY ASSEE, FLORIDA
3. The Florida docu L0900055	iment/registration number of this line 5779	nited liability cor	npany is:
4. I, DANIEL N	ASSAR , he	ereby resign as a	Manager (Print Title)
of this limited liab resignation in wri	pility company and affirm the limited ting.	d liability compa	ny has been notified of my
% ignature of Resi	gning Member, Managing Member	or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		