209000064093

| 4 |
|---|
| (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: |
| A LUNT |

OCT - 2 2009

EXAMINER

Office Use Only



700157962567

10/01/09--01012--024 **25.00

2009 OCT -T PRIZ: 46 SECRETARY OF STATE FAULAHASSEE, FLORIDA

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: assys TARE AND (Name of Limited Liability Co | EVENTI Planning, LLC |
| The enclosed member, managing member or manager resigning. | gnation and fee(s) are submitted for |
| Please return all correspondence concerning this matter to | : |
| MEDRING POSEVE 1+ (Contact Person) | - 72 720 |
| Jassy's Fare + Event Planning (Firm/Company) | FILED 2009 OCT -1 PM 12: 46 SECKETARY OF STATE FALLAHASSEE, FLORID |
| 5109 N. (entral Ave. | PM 12: L |
| Tampa, FL 33603 (City/State and Zip Code) | _ - - |
| For further information concerning this matter, please call: | : |
| MFREWYN ROSevelt at (813) (Name of Contact Person) (Area Code | e & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Florida \$25 Filing Fee | Department of State for: \$55 Filing Fee & Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations Clifton Building | Division of Corporations P.O. Box 6327 |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 |

CR2E079 (5/06)

Tallahassee, Florida 32301

To Whom It May Concern:

It is with deep regret that I tender this letter of resignation. Please accept my letter of resignation as Manager or any other part of Jassy's Fare and Event Planning, LLC.

Kull Athena Cartaya

athenaassoc@aol.com

813.877.5047

SECRETARY OF STATE



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: <u>JASSYS FARE AND EVENT CANNING (LC.</u> . | |
|--|--|
| 2. This limited liabil | ity company was organized under the laws of: E OF FIORIDA. TALL ARY OF THE PROPERTY OF THE P |
| 3. The Florida docur $\frac{1}{2} \frac{1}{2} \frac{1}{2}$ | nent/registration number of this limited liability company is: |
| 4. I, Allo NO | CARTAYA, hereby resign as a Manager (Print Title) |
| of this limited liabi | ility company and affirm the limited liability company has been notified of my ing. |
| Signature of Resig | ning Member, Managing Member of Manager |
| Filing Fee: | \$25.00 (Required) |

Certified Copy:

\$30.00 (Optional)