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(Requestor's Name)	
(,	
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PICK-UP WAIT M	AIL
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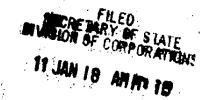
JAN 19 2011 N. Culfigan

COVER LETTER

Division of Corporations	
SUBJECT: MOKNING STOR !	STAFFING LLC Liability Company)
The enclosed member, managing member or mar filing.	nager resignation and fee(s) are submitted fo
Please return all correspondence concerning this	matter to:
BELODUN POELSSUA (Contact Person)	· · · · · · · · · · · · · · · · · · ·
Morning Star Starfing L	LC
1603 Primore Brive (Address)	
67 and on Pl 33511 (City/State and Zip Code)	
For further information concerning this matter, p	lease call:
(Name of Contact Person) at (813 751-7569 Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$\sum_{\text{\$\subset}}\$\$\$25 Filing Fee	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	•

CR2E079 (5/06)





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 of State is:	limited liability company as it ap	ppears on the re	cords of the Florida Department
2. This limited liab	pility company was organized unc $ heta$	ler the laws of:	
	ument/registration number of this 0083/65	i limited liabilit	y company is:
4.1, JETUNI	DE ADEGBILA Jame of Person Resigning)	_, hereby resign	as a MANHEARL MEMBER
	bility company and affirm the lin		
Signature of Resi	de Hogbook igning Member, Managing Meml	er or Manager	-
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		