L09000083192

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SECRETARY OF CHATE

COVER LETTER

Division of Corporations	
SUBJECT: ANNAMARI VEVT	VRES LLC
(Name of Limited)	Liability Company)
The enclosed member, managing member or man filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
RONALD MILTON (Contact Person)	
(Contact Person)	
(Firm/Company)	
3142 DKK WILSON DK.	
(Address)	
3142 DKK WILSON DR. (Address) SARASOTA, FZ. 34246	
(City/State and Zip Code)	
For further information concerning this matter, p	lease call:
(Name of Contact Person) at (941 228-4282
(Name of Contact Person)	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	e Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
<u>—</u>	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)





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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	₹		
	imited liability company as it a		the Florida Department
of State is:	NNAMARI VENTURE.	5 440	
			•
	lity company was organized un	ider the laws of:	
FLOR	RIDA	•	
			
2 (F). (F) 1 1			•
3. The Florida docur	ment/registration number of thi	is limited liability compa	iny is:
_ 209000	0083192	 •	
1.00.	· (2) Face -		11/21
4. I, /VIARIANI	WA S776L/T2_ me of Person Resigning)	_, hereby resign as a	MGKM
	ility company and affirm the lin	mited liability company	has been notified of my
resignation in writi	ing.		
1			
1 Thu	MGRM	· •	
Signature of Resig	ning Member, Managing Mem MILTON MERM	iber or Manager	
KONALD ,	MICTON MERM.	•	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		
	è		
	₹°		

CR2E079 (5/06)