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(Re	equestor's Name)	-
(Ad	ldress)	
(Ad	ldress)	·
. (Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



JAN - 4 2011

EXAMINER



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01/03/11--01026--015 **25.00

11 JAN -3 AM 9: 24 SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	V
SUBJECT: MELINES ENTERPRISE	LLC
(Name of Limited	Liability Company)
The enclosed member, managing member or managing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	s matter to:
MARIA E. GIROUD	
(Contact Person)	
MELINES ENTERPRISE LLC	
(Firm/Company)	· . • · · ·
5971 NW 201 LANE	
(Address)	
MIAMI, FLORIDA.33015	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
MARIA E. GIROUD	305 868-0072
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	ne Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	The state of the s

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 a		s of the Flo	orida Departn	nent ·
2. This limited liab FLORIDA	ility company was organize	d under the laws of:		11 JAN -3 SECRETAR TALLAHASS	2
3. The Florida docu L09000085	iment/registration number o	of this limited liability con	npany is:	3 AM 9: 24 NY OF STATE SEE, FLORIE	
4. I, NESTOR	J. GIROUD ame of Person Resigning)	, hereby resign as a	MGR (Pr	int Title)	_
of this limited lial resignation in wri	oility company and affirm the	he limited liability compa	ny has bee	n notified of	my
Signature of Resi	gning Member, Managing I	Member or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	·	•		