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SECRETARY OF STATE
ALLAHASSEE, FLORIO

J. BRYAN
JAN 2 0 2009
EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

CR2E079 (5/06)

SUBJECT: Pelaji LLC (Name of Limited Liability Cor	npany)
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Androniki Beavers (Contact Person)	_
(Contact Person) Belaji, LLC (Firm/Company)	10 JAN 19 SECRETAR FALLAHASS
2730 Broadway Center Blu (Address)	TARY OF STATE LORIE
Brandon 7 33510 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Androhiki Beavers at (813) (Name of Contact Person) (Area Code	546 - 9920 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I \$25 Filing Fee	Department of State for: \$55 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



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 a	as it appears on the records	of the Florida Department
2. This limited liab	ility company was organize	ed under the laws of:	
	ment/registration number of 0093489	of this limited liability con	npany is:
		, hereby resign as a	
of this limited lial resignation in wr	pility company and affirm the iting.	the limited liability compar	ny has been notified of my
Signature of Resi	gning Member, Managing	Member or Manager	7AL SE →
•	\$25.00 (Required) \$30.00 (Optional)		JAN 19 PECRETARY OF LAHASSEE.