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12 OCT 30 PH 12: 178

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: M&J. CZ, LLC (Name of Limited Liability)	ity Company)
The enclosed member, managing member or manager filing.	r resignation and fee(s) are submitted for
Please return all correspondence concerning this matt	ter to:
Jitrenka Kelly (Contact Person)	
	·
(Firm/Company)	
110 Little Wekiva Ct (Address)	
Longwood, FZ, 32779 (City/State and Zip Code)	
For further information concerning this matter, please	e call:
Name of Contact Person) at (40)	27 6/7 75 32 a Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo \$25 Filing Fee	orida 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

CR2E079 (5/06)



FILED

12 OCT 30 PM 12: TO

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		as it appears on the records o	•
2. This limited liab	ility company was organi	zed under the laws of:	
FR.	ORIJA	•	
	•		
3. The Florida docu	ıment/registration numbe	r of this limited liability comp	any is:
L0900	0101029	•	
4. I, JITREN	KA KELLY (ame of Person Resigning)	, hereby resign as a	MANAGER (Print Title)
	bility company and affirm	n the limited liability company	
	Relly 1.		
Signature of Res	Zelly / Gember, Managin	g Member or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Conv:	\$30.00 (Optional)		