#/ 10000022889

(Req	juestor's Name)				
(Add	lress)				
(Add	lress)				
(City	/State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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SECRETARY OF STATEFAIT AHASSEE, FLORIDA

K.SALY EXAMINER JUL - 3 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA AUTO CONNECTION LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

(Contact Person) (Firm/Company)

201 GOLDEN ISLES DR #306

(Address)

HALLANDALE BEACH FL 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

SIDI ABDALLAOUI	at (954) 588-0378	
(Name of Contact Person)	(Area Code & Daytime Telephone Number	

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

□ \$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:

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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

1. The name of the of State is: FLC	limited liability company as DRIDA	t appears on the records of t	he Florida Department
2. This limited liab	ility company was organized FLORIDA	under the laws of:	
3. The Florida docu L100000228	ument/registration number of 389	this limited liability compan	ıy is:
4. I, FIDAN NO	RIEGA	hereby resign as a MA	NAGER
(Print N	ame of Person Resigning)	, hereby resign as a MA	(Print Title)
resignation in wr	pility company and affirm the iting.	•	as been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		