L10000062304

				•	
	(Req	uestor's	Name)		
	/A 21 at				
	(Add	ress)			
	(Add	ress)	<u></u>		
	•	,			
,±	(City/	/State/Zi	p/Phone #)		
PICK	-UP	□ w	AIT	MAIL	
· · · · · · · · · · · · · · · · · · ·	(Bus	iness Er	tity Name)	· · · · · · · · · · · · · · · · · · ·	
	(Doc	ument N	umber)		
var Nasaran Salah Nasaran Salah					
Certified Copies _	*	Ce	tificates of	Status	
Special Instructi	ons to F	iling Offi	cer:		
	•				
			- 3	,	
	"	. :	· .		
•					
`				•	

Office Use Only



000183606280

- 000183606280 07/27/10--01017--015 **25.00

ZOIN JUL 27 PH ID: 86

C. LEWIS

JUL 2 8 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CREATING DIVINE ORD	DER, L.L.C. I Liability Company)
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	s matter to:
khosrow Owji	
(Contact Person)	
	,
(Firm/Company)	-
1766 Seneca Blvd	
(Address)	
Winter Springs, FI 32708	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Khosrow Owji	407 \ 617-4566
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t	
✓ \$25 Filing Fee	\$55 Filing Fee &
	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 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

FILED

2010 JUL 27. PM @ 95

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

	limited liability company as i	* *	the Florida Department
2. This limited liab Florida	ility company was organized	under the laws of:	
3. The Florida docu L10000062	ment/registration number of 2304	this limited liability compa	ny is:
4. I. Khosrow C	Owji	, hereby resign as a M	gr
(Print Name of Person Resigning)		,	(Print Title)
of this limited lial resignation in wr	oility company and affirm the ting.	limited liability company l	has been notified of my
(Kluz	7/22/	//o	
Signature of Resi	gning Member, Managing M	ember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (5/06)