C10000067912

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(Reque	estor's Name)			
(Addro	ess)			
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(Address)				
	1 100. 1001			
(City/S	tate/Zip/Phone) #)		
PICK-UP	WAIT	MAIL		
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Certified Conies	Certificates	of Status		
Certified Copies Certificates of Status				
Special Instructions to Fili	na Officer:			
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

T. CLINE
JUL 13 2010
EXAMINER

COVER LETTER

TO:

CR2E079 (5/06)

TO: Registration Section Division of Corporations		
SUBJECT: Once Again Nance,	LLC Limited Liability Company)	 .
(Name of	Limited Liability Company)	
The enclosed member, managing member filing.	or manager resignation and fee(s) are submitted for
Please return all correspondence concerni	ng this matter to:	
Nancy Paitaris		
(Contact Person)	1	ZBHI JUL 12 SEGRETAR FALLAHASS
Once Again Nance, LLC	·	
(Firm/Company)	<u> </u>	2 PM RY OF SSEE.F
1925 Helmly Terrace		S A S
(Address)	1	ATE RIDA
Deltona, FL 32725	<u> </u>	
(City/State and Zip Code)		
For further information concerning this m	atter, please call:	
Nancy Paitaris	at (386) 532-5128	·
(Name of Contact Person)	(Area Code & Daytime Telep	ohone Number)
Enclosed please find a check made payab \$25 Filing Fee	le to the Florida Department of St \$55 Filing Fee & Certified Cop	3
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations



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 limited liability company as it app of State is: Once Again Nance, LLC	pears on the records	of the Fl	orida Depa	artment	t
This limited liability company was organized unde Florida	r the laws of:	,	SECRETA TALLAHA	2949 JUL 12	program.
3. The Florida document/registration number of this l L10000067912	limited liability com	pany is:	ARY OF STA SSEE, FLOI	12 PM E:	
4. I, Anthony Paitaris (Print Name of Person Resigning)	hereby resign as a	manag (P	ging me	ယ	•
of this limited liability company and affirm the limi resignation in writing.	ted liability compan	y has be	en notified	l of my	
Signature of Resigning Member, Managing Member	er or Manager	•			
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)		3			