L10000103202

•					
(Requestor's Name)					
(Address)					
(Address)					
,					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
·					
Special Instructions to Filing Officer:					
, opedar instructions to 1 ming officer.					
·					

Office Use Only



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C. LEWIS

DEC 3 2010

EXAMINER

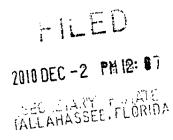
COVER LETTER

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CR2E079 (5/06)

TO:	Regis	stration Section		
	Divis	sion of Corporations		
SUBJ	ECT:	Champino's, LLC		
		(Name of Limi	ted Liability Co	ompany)
The entition of the filling.		d member, managing member or	manager resi	gnation and fee(s) are submitted for
Please	e return	all correspondence concerning	this matter to	:
S. A	nthoi	ny DiMillo		
		(Contact Person)	··· · · · · · · · · · · · · · · · · ·	
Cha	mpin	o's, LLC		_
		(Firm/Company)		
6617	7 Nor	th Socrum Loop Rd		
		(Address)		
Lake	eland	, Florida 33809		
		(City/State and Zip Code)		
For fu	rther ir	nformation concerning this matte	r, please call	:
S. A	nthor	ny DiMillo	at (863	409-9933
	(N	ame of Contact Person)	(Area Cod	e & Daytime Telephone Number)
Enclos	sed ple	ase find a check made payable to	the Florida	Department of State for:
	F	\$25 Filing Fee		\$55 Filing Fee &
			لبخيا	Certified Copy
STRE	ET/C	OURIER ADDRESS:		MAILING ADDRESS:
		Section		Registration Section
		Corporations		Division of Corporations
	n Build	~		P.O. Box 6327
		ive Center Circle		Tallahassee, Florida 32314
Tallah	assee,	Florida 32301		





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 of State is: Champinos, LLC	appears on the records of the Florida Department
2. This limited liability company was organized un State Of Florida	nder the laws of:
3. The Florida document/registration number of th L10000103202	is limited liability company is:
4. I, Paul Shalaj (Print Name of Person Resigning) of this limited liability company and affirm the liresignation in writing. Signature of Resigning Member, Managing Mem	12-1-10
Filing Fee: \$25.00 (Required)	

Certified Copy:

\$30.00 (Optional)

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