110000129833

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800210824198

08/18/11--01007--003 **25.00

11 AUG 18 PHIZ: 12

B. BOSTICK
AUG 1 9 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: USA SLAUGHTERH (Name of I	OUSE, LLC 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:
SUMREEN, MUSA	
(Contact Person)	
USA SLAUGHTERHOUSE, LL	C
(Firm/Company)	
65 CRESTHILL RD	
(Address)	
YONKERS NY 10710 US	AUG 18
(City/State and Zip Code)	1777
For further information concerning this m	atter, please call: at (914) 447-4915
SUMREEN, MUSA	at (914) 447-4915 ORDE 72
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	e to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as A SLAUGHTERHOUS	• •	the Flo	orida De	partm	ent
2. This limited liab	ility company was organized	under the laws of:		JALL/	<u> </u>	
3. The Florida docu L10000129	nnent/registration number of 9833	this limited liability compan	ny is:	HASSEE E	AUG 18 PH12: 12	THE STATE OF THE S
4. I, BAYYAT, (Print N	LOUAY ame of Person Resigning)	, hereby resign as a MC	$\frac{GR}{\mathit{(Pr)}}$	ORIGINAL INTERIOR INTO THE PROPERTY OF THE PRO	<u></u>	_
of this limited liab resignation in wr	oility company and affirm the	e limited liability company h	as bee	n notifi	ed of r	ny
Signature of Resi	BAYYA gning Member, Managing M	ember or Manager				
-	\$25.00 (Required)					
Certified Copy:	\$30.00 (Optional)					