111000001694

(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:				
·				

Office Use Only



200192095902

01/21/11:--01022--006 **25.00

11 JAN 21 AM ITT 40

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JAN 2 4 2011

CXAMINED

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	ECT:	MARY MINA KYRILLO	OS, LLC ad Liability Company)	
The enfiling.		l member, managing member or m	nanager resignation and fee(s) are submitted	for
Please	return	all correspondence concerning th	is matter to:	
<u>LIL</u>	Y AN	MADOR		
		(Contact Person)		
SHC	AMC	R ACCOUNTING, PA		
		(Firm/Company)		
777	7 NV	V 146TH ST		
	,	(Address)		
MIA	MLL	AKES, FL 33016		
		(City/State and Zip Code)		
For fu	rther in	nformation concerning this matter,	, please call:	
LILY	/ AN	IADOR	at (305) 825-1123	
	(N	ame of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payable to	the Florida Department of State for: \$55 Filing Fee & Certified Copy	
		OURIER ADDRESS:	MAILING ADDRESS:	
		Section Corporations	Registration Section	
	on of C n Build	•	Division of Corporations P.O. Box 6327	
2661 F	Executi	ive Center Circle 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

1. The name of the limited liability company as it of State is: MARY MINA KYRILLO	••
2. This limited liability company was organized u FLORIDA	nder the laws of:
3. The Florida document/registration number of the L11000001694	nis limited liability company is:
4. I, MIRA ZAKI	, hereby resign as a MEMBER
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the l resignation in writing.	imited liability company has been notified of my
	
Signature of Resigning Member Managing Mer	mber or Manager
	<u>ت</u>

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: