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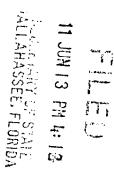
(Requestor's Name)				
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(City/State/Zip/Phone #)				
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D. BRUCE
JUN 1 4 2011
EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: TI AULO 4 TEANIMON (Name of Limited Liability	Mission, LLC cy Company)	
The enclosed member, managing member or manager filing.	resignation and fee(s) are submitted for	
Please return all correspondence concerning this matter	er to:	
KESIA Chang (Contact Person)		
J's Auto & TRansmission, (Firm/Company)	<u>U</u>	
4361 OKEEChobEE Blid., J	PTE AG	=
(Address) WEST Palm Brach, FL 3. (City/State and Zip Code)	13409 RASSEC, F	
For further information concerning this matter, please	call:	
(Name of Contact Person) at (56)	1) 615-2400	•
(Name of Contact Person) (Area (Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Flori \$25 Filing Fee	ida Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section	
Division of Corporations	Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

TO: Registration Section



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 i)epartme	ent _·
	ility company was organized		PALLAHASS	11 JUN 13	126 g s., 6 43PHrs . 94Manages
3. The Florida doc	ument/registration number of	this limited liability comp	pany is:		beerdan.
	0037160		T G	PR SE	, i
4. I, HER	Man Chang Jame of Person Resigning	, hereby resign as a _	MGRA THE	7 (3	_
	bility company and affirm the				ıy
Signature of Resi	gning Member, Managing Me	ember or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				