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K. SALY EXAMINER OCT 26 2011

COVER LETTER

	_	ation Section on of Corporations	
SUBJE	ECT: [DESIGNERZ BOUTIQ	UE LLC
		(Name of Lim	ited Liability Company)
The endfiling.	closed r	nember, managing member or	manager resignation and fee(s) are submitte
Please	return a	II correspondence concerning	this matter to:
NAU:	SHIN	A CHATOO KHAKI	
		(Contact Person)	
DESI	IGNEF	RZ BOUTIQUE LLC	
		(Firm/Company)	
1421	PINE	OAK TRAIL	
		(Address)	
SAN	FORD), FL 32773	
		(City/State and Zip Code)	
For fur	ther info	ormation concerning this matte	er, please call:
NAUS	SHINA	A KHAKI	at (407) 731-2448
	(Nan	ne of Contact Person)	(Area Code & Daytime Telephone Number)
Enclose	ed pleas	se find a check made pavable t	o the Florida Department of State for:
	, [\$25 Filing Fee	\$55 Filing Fee &
	_	_	Certified Copy
STREI	ET/CO	URIER ADDRESS:	MAILING ADDRESS:
Registr	ration Se	ection	Registration Section
		rporations	Division of Corporations
	Buildin		P.O. Box 6327
		e Center Circle	Tallahassee, Florida 32314
Tallaha	assee, Fl	orida 32301	

CR2E079 (5/06)



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TALLAHASSEE, FLORIDA

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 SIGNERZ BOUTIQUE	= · · · · · · · · · · · · · · · · · · ·	the Florida Department
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doci	ument/registration number of 7816	this limited liability compar	ny is:
4. I, RABIA HE	MANI	, hereby resign as a MGR (Print Title)	
,	ame of Person Resigning)		(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability company h	nas been notified of my
Rhema	~~/.		
Signature of Resi	gning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		