L11000131462

(Requestor's Name)				
•				
(Addross)				
(Address)				
(Address)				
(O. (O.) (O.) (O.)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
•				
Certified Copies Certificates of Status				
•				

Special Instructions to Filing Officer:

A. LUNT

FEB - 6 2011

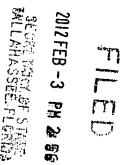
EXAMINER

Office Use Only



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02/03/12--01010--017 **25.00



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Flag King InterNAtion Name of Limited Liability Con	npany)
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
JASON Smith (Contact Person)	
(Contact Person)	-
(Firm/Company)	~ ~
941 SAN CARlos BR. Unit#1	2012 FEB - 2
941 SAN CARlos DR. Unit 1 (Address) Ft. Myens Beach, FL 3393) (City/State and Zip Code)	
For further information concerning this matter, please call:	व्यक्ति का
Name of Contact Person) at (845) (Area Code) 527-5750 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida L \$25 Filing Fee	Department of State for: 355 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, 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 lin	nited liability company as it ar	opears on the records of	the Florida Dep	artment
of State is:	ng King Intern	ational, LLC	?	
	ل ل		Σ_{ϵ}	20
11.	ty company was organized und	ler the laws of:	1 S	II2FEB
- Ylorib	A		20 E	1
				ω
3. The Florida docum	ent/registration number of this	limited liability compa	my is:	3 17
<u> </u>	0131462	<u>.</u> •		88 C
~	Cui		M	S
4. I, <u>JASON</u>	JMI+h	, hereby resign as a	MOKIM	
•	e of Person Resigning)		(Print Title)	
of this limited liabil resignation in writing	ity company and affirm the lim	ited liability company l	has been notified	of my
Augustion in with	·g.			
Signature of Resign	ing Member, Managing Memb	per or Manager		
ľ		-		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			