Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CARLTON FIELDS Account Number: 076077000355 : (813)223-7000

Fax Number : (813)229-4133

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

RANAGIVE @ CARITONTI

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MUSHA INVESTMENTS, LLC

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MUSHA INVESTMENTS, LLC	;	
(Name of Limite	d Liability Co	mpany)
The enclosed member, resignation or dissociati	ion and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to:	
RAHUL P. RANADIVE		
(Contact Person)		_
CARLTON FIELDS		
(Firm/Company)		_
100 SE 2ND ST., SUITE #4200		
(Address)		
MIAMI, FL 33131		
(City/State and Zip Code)		
For further information concerning this matter,	please call:	
RAHUL P. RANADIVE	305	530-0050
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to t \$\mathbb{B}\$ \$25 Filing Fee		Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

2. The Florida doc L.1100013407	ument/registration number a	ssigned to this limited liability company is	- 1941-
		signed or will withdraw/resign is:	28 F
4. I,	. MAMUJEE	, hereby withdraw/resign as a	. H 9:
	lame of Person Resigning)		-, cn
MANAGER		·	≍ ′ œ
,	(Print Title)		
of this limited lia resignation in wr		he limited liability company has been notifie	d of my
Signature of D	issociating Member or Resig	gning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		