L12000010200

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
<u></u>	,			
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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SECRETARY OF STATE
MIT AHASSEE EL GOD.

COVER LETTER

TO: Registration Section Division of Corporations	·
Division of Corporations	
SUBJECT: J.D.J. INTERNATIONAL G	
(Name of Limited L	nability Company)
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
JOSE DIAZ	
(Contact Person)	
(Firm/Company)	
(Firm/Company)	
3590 N. HWY 17-92 STE 1000	
(Address)	
LAKE MARY FL 32746	
(City/State and Zip Code)	
For further information concerning this matter, pl	ease call:
JOSE DIAZ	407 , 310-1986
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	Florida Department of State for:
\$25 Filing Fee	
<u></u>	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)



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SEURETARY OF STATE
TALEAHASSEE, FEORIDA

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 J. INTERNATIONAL		he Florida Department
2. This limited liab	vility company was organized o	inder the laws of:	
3. The Florida doc L1200001	ument/registration number of t	his limited liability compan	y is:
4. I, JOSE DIAZ (Print Name of Person Resigning)		, hereby resign as a MGR	
	bility company and affirm the	limited liability company ha	(Print Title) as been notified of my
Lack			
Signature of Res	gning Member, Managing Me	mber or Manager	
_	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		