

L12000091094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

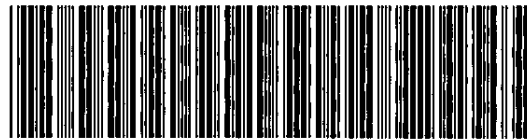
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300257467583

03/26/14--01011--010 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 26 PM 4:02

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INDIAN SPICY VENTURES LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

KATUKOJWALA, VIDYA SAGAR

(Contact Person)

INDIAN SPICY VENTURES LLC

(Firm/Company)

1406 E FOWLER AVE

(Address)

TAMPA, FL 33612

(City/State and Zip Code)

For further information concerning this matter, please call:

KATUKOJWALA, VIDYA SAGAR at **201** **680-8739**

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing 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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: INDIAN SPICY VENTURES LLC

2. The Florida document/registration number of this limited liability company is:
L12000091094

3. The date this member withdrew or will withdraw is: 02/26/2014

4. I, BANDI, PAVAN, hereby resign as a MEMBER
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Resigning or Dissociating Manager, Member

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 26 PM 4: 02