L/2000/08222

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COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT:	155	AGNUE	NUZTA	CUTCITAINMENT	LLC		
(Name of Limited Liability Company)							

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

Please return all correspondence concerning this matter to:

Contact Person)

(Firm/Company)

211 320 ST SOUTH (Address)

SA, JT PETERBURG FR 33701 (City/State and Zip Code)

For further information concerning this matter, please call:



Brin Brin Dro at (727) 742-0754 (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 FILED

HASSEE H

CR2E079 (5/06)



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 limited					
of State is: 15T AND	ENJE NORTH	GUTGTANM			22
11 - La	and the second	·	••		8 7
2. This limited liability con	npany was organized u	nder the laws of:		ASS -	
FLORIDA	·····			(T) and	- 1
				NF SA	
3. The Florida document/re	gistration number of t	his limited liability co	ompany is:	04 10A	

4. I, <u>RICKELE FAGE ZI</u>, hereby resign as a <u>MGMR</u> (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.

L12000108222

Signature of Resigning Member, Managing Member or Manager

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

CR2E079 (5/06)