L13.000012245

(Requestor's Name)				
(Address)				
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





900243659929

01/31/13--01007--022 **25.00

FILED

1013 JAN 31 AM 11: 55

SECRETARY OF STATE

AND SECRETARY OF STATE

AND

FEB - 1 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT. PAPAYA SPA 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:

DONALD M LEE

(Contact Person)

(Firm/Company)

145 CHESTNUT STREET

(Address)

LEONIA, NJ 07605

(City/State and Zip Code)

For further information concerning this matter, please call:

PERRY A MASHBURN

<u>"</u>,561

876-5612

(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

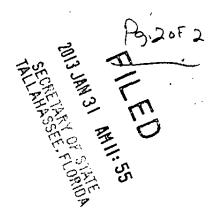
MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



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 PAYA SPA LLC	t appears on the record	s of the Florida Department
2. This limited liabi	lity company was organized u	under the laws of:	
3. The Florida docu L130000122	ment/registration number of t	his limited liability con	mpany is:
4. I. TOK SUN F	RASH	, hereby resign as a	MGR MEMBER
	ime of Person Resigning)	, nereby resign as a	(Print Title)
of this limited liab resignation in wri	sility company and affirm the ting.		
The total	1/2/	-	
Signature of Resignature	gning Member, Managing Me	mber or Manager	And the second second
Filing Fee:	\$25.00 (Required)		
	\$30.00 (Optional)		

CR2E079 (5/06)