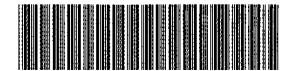
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(Re	questor's Name)			
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PAPRIL PH 3: 3

APR 12 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Florida Huaren Business Consulting 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:

Ling Gentry
(Contact Person)
Florida Huaren Business Consulting LLC
(Firm/Company)
7364 IRONSIDE DR E
(Address)
Jacksonville, FL 32244
(City/State and Zip Code)

FILED 2013 APR 11 PH 3: 33 SECRETARY OF STATE SECRETARY OF STATE

For further information concerning this matter, please call:

Ling Gentry

_{at} 904

742-9996

(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

1. The name of the	limited liability company as	it appears on the records of the Fl	lorida Department
of State is: FLO	ORIDA HUAREN BUSIN	NESS CONSULTING LLC	# . B
2. This limited liab	oility company was organized	under the laws of:	BECRETARY OF
3. The Florida doci	_	this limited liability company is:	PH 3: 33
_{4. I,} Xiaolong ZI		, hereby resign as a MGRM	1
(Print A	lame of Person Resigning)	(Print Title)	
resignation in wr	iting.	e limited liability company has be	en notified of my
Signature of Resi	igning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		