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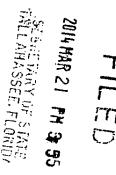
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
MAR 2 8 2014			
A. LUNT			

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JSAMI LLC (Name of Limit	ted Liability Com	epany)
The enclosed member, managing member or utiling.	manager resigi	nation and fee(s) are submitted for
Please return all correspondence concerning to	his matter to:	
MICHAEL LEIBOWITZ		
(Contact Person)		•
JSAMI LLC (Firm/Company)	··· · · · · · · · · · · · · · · ·	ZOINMAR 21 SALLAHÄSSEE
301 HENDRICKS ISLE (Address)		AR 21 PH 3: 55
FORT LAUDERDALE, FL (City/State and Zip Code)	33301	· · · · · · · · · · · · · · · · · ·
For further information concerning this matter	r, please cali:	
MICHAEL LEIBOWITZ	_{at (} 248	,613-8444
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee		epartment of State for: 55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P.O. Box 6327

Tallahassee, Florida 32314

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

of State is:	he limited liability company as SAMI LLC	it appears on the records of	the Florida Department
2. This limited li Florida	ability company was organized	under the laws of:	ZOIL HAR 21
3. The Florida do <u>L1300004</u>	ocument/registration number of 3862	this limited liability compa	ny is gs
4. 1,	LEIBOWITZ	, h ereb y resign as a <u>M</u>	
	I Name of Person Resigning) liability company and affirm the writing.	e limited liability company l	(Print Title) has been notified of my
Signature of R	esigning Member, Managing M	lember or Manager	
Filing Fee:	\$25.00 (Required)		

\$30.00 (Optional)

Certified Copy: