# L13000115301

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#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: FMJ ENTERPRISES, 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:

FRANK SHARPE				
(Contact Person)				
(Firm/Company)				
31940 US HWY 19 NORTH				
(Address)				

### PALM HARBOR, FL 34684

(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK SHARPE	727 <u>460-0495</u>
(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

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	the limited liability company as MJ ENTERPRISES, LLC		s of the Florida Department
2. This limited I FLORIDA	iability company was organized	under the laws of:	
3. The Florida d L1300011	ocument/registration number of	this limited liability con	npany is:
4. I, MARTIN		, hereby resign as a	MEMBER
	nt Name of Person Resigning) liability company and affirm the writing.	e limited liability compa	(Print Title)  ny has been notified of my
Mori	En S. Gu	resh	
Signature of R	esigning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		

Certified Copy:

\$30.00 (Optional)