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Charlana A

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FYYSH FNERPRISES LLC (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
PRENDA PIRANI/ (Contact Person)
FYYSH ENTELPRISES LLC (Firm/Company)
458 B BAYSHORE I DRIVE
MIRAMAR BEACH FL 32550 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (850) 830 9112 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$\sum \frac{1}{2}\$\$ \$55 Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: FYYSH ENTERPRISES LLC
2. The Florida document/registration number assigned to this limited liability company is:
L23000307215
3. The date this member/manager withdrew/resigned or will withdraw/resign is: November 20, 20
4. I, AUL A PIRAN hereby withdraw/resign as a (Print Name of Person Resigning)
MEMBER (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Telli-
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)