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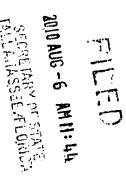
	(Requestor's Name)				
	(Address)	•			
+	(Address)				
	(City/State/Zip/Phone #)				
PICK-UF	P WAIT	MAIL MAIL			
(Business Entity Name)					
- (Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
	•				

Office Use Only



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C. LEWIS

AUG - 9 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ZIZI PINA, L.C.	
	Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted fo
Please return all correspondence concerning this	matter to:
Gary Ellis Byrd	·
(Contact Person)	
Gary Ellis Byrd, LLC, Attorney	
(Firm/Company)	
P.O. Box 489	·
(Address)	
Hamilton, GA 31811	
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
Gary Ellis Byrd	(Area Code & Daytime Telephone Number)
(Name of Contact:Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	**S55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FILED

2010 AUG -6 AM M: 45

SECRETARY DUSTATE IALLAHASSESFLORIJA

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 to	the limited liability company as ZIZI PINA, L.C.	it appears on the records of	f the Florida Department
2. This limited I State of I	iability company was organized Florida	under the laws of:	
3. The Florida d L970000	ocument/registration number of	this limited liability compa	any is:
4. I, Bernard	S. Martins	, hereby resign as a	nember
(Prir	nt Name of Person Resigning)	,	(Print Title)
of this limited resignation in	liability company and affirm the writing.	e limited liability company	has been notified of my
Spina	Mala		
Signature of R	esigning Member, Managing M	lember or Manager	
Filing Fee:	\$25.00 (Required)	, .	

Certified Copy:

\$30.00 (Optional)