

# M010000000833

CORPORATION

CORPORATION(S) NAME

FAZUR, LLC

Resignation of Manager(s)

M01-833

700005147117--8

-03/25/02--01001--004

\*\*\*\*\*25.00 \*\*\*\*\*25.00

<input type="checkbox"/> Profit	<input checked="" type="checkbox"/> (X) Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> (x) Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> (x) Pick Up
<input type="checkbox"/> Mail Out		

02 MAR 22 AM 9:25

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

W2  
3/2

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

3/22/02

Order#: 5210855

Ref#:

Amount: \$

02 MAR 22 PM 3:14

RECEIVED

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

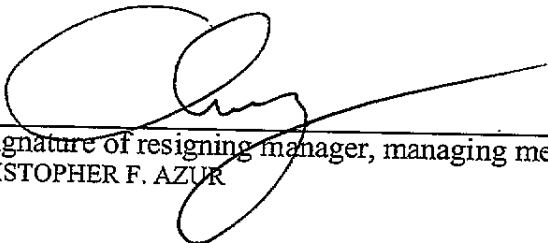
**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I, CHRISTOPHER F. AZUR, hereby resign as MANAGER  
(Title)

of FAZUR, LLC  
(Limited Liability Company)

a limited liability company organized under the laws of the State of PENNSYLVANIA

and affirm that the limited liability company has been notified in writing of the resignation.

  
(Signature of resigning manager, managing member or member)  
CHRISTOPHER F. AZUR

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 MAR 22 AM 9:25

**FILING FEE IS \$25.00**

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314