

M05000003920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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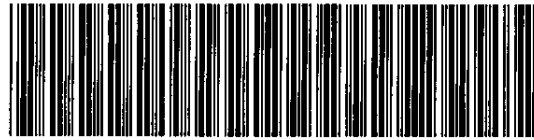
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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April 16, 2007

RE: ZOHOURI HOLDINGS FLORIDA, LLC (DE.DOM.)

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL. 32314

Dear Sir or Madam:

We enclose resignations executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is 1 check in the amount of \$25.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

*Theresa Alfieri (lk)*

Theresa Alfieri

Senior Supervisor & Assistant Secretary  
TA/lk  
Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

C T CORPORATION SYSTEM, hereby resigns as  
(Name of Registered Agent)

Registered Agent for \_\_\_\_\_  
ZOHOURI HOLDINGS FLORIDA, LLC (DE.DOM.)  
(Name of Limited Liability Company)

M050000031920  
(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

C T CORPORATION SYSTEM - Theresa Alfieri  
(Typed or Printed Name)  
ASSISTANT SECRETARY  
(Capacity)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### FILING FEES:

\$ 85.00 Active limited liability company  
\$ 25.00 Administratively dissolved/ voluntarily dissolved/  
withdrawn limited liability company

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