

MU7UUUUUU 2937

(Requestor's Name)

(Address)

- (Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/18/10--01029--017 **50.00

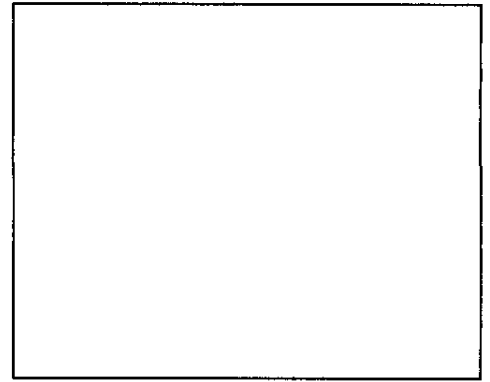
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 15 AM 10:00

B. KOHR

OCT 18 2010

EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC.
1211 CIRCLE DRIVE
TALLAHASSEE, FL 32301
PHONE (850)656-6446



OFFICE USE ONLY

WALK-IN

ENTITY NAME:

AFC LLC

CK# 4889 FOR \$50.00 (\$25.00 for this filing)

PLEASE FILE THE ATTACHED RESIGNATION & RETURN THE FOLLOWING:

___ CERTIFIED COPY

XXX STAMPED COPY

___ CERTIFICATE OF STATUS

10 OCT 15 AM 10:00
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Examiner's Initials

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AFC LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TLS/NRAI

(Name of Person)

NRAI CORPROATE SERVICES

(Firm/Company)

2731 EXECUTIVE PARK DRIVE, SUITE 4

(Address)

WESTON, FL 33331

(City/State and Zip Code)

For further information concerning this matter, please call:

TLS

(Name of Person)

at (954) 318-2787
(Area Code & Daytime Telephone Number)

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

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| ☒ \$25 Filing Fee | ☐ \$30 Filing Fee &
Certificate of Status | ☐ \$55 Filing Fee &
Certified Copy | ☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|--|--|

RECEIVED
DIVISION OF CORPORATIONS
10 OCT 15 AM 10:00



FILED IN STATE
DIVISION OF CORPORATIONS
10 OCT 15 AM 10:00

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 the limited liability company as it appears on the records of the Florida Department of State is: AFC LLC

2. This limited liability company was organized under the laws of:
DELAWARE

3. The Florida document/registration number of this limited liability company is:
M07000002937

4. I, WEISMAN, SUSAN, hereby resign as a MANAGER
(Print Name of Person Resigning) *(Print Title)*

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

A handwritten signature in cursive script, reading "Susan Weisman", is written over a horizontal line.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)