## 1108000003976

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SECRETARY OF STATE DIVISION OF CORPORATIONS

J. BRYAN
SEP 3 0 2008
EXAMINER

## **COVER LETTER**

Division of Corporations		
SUBJECT: All in the Carni (Name of Limited Liab	ly Moung & stoage a	of mass, cuc
The enclosed member, managing member or managiling.	ger resignation and fee(s) are submitted.	ed for
Please return all correspondence concerning this ma	atter to:	
LISA Abassi		
(Contact Person)		DIVISION OF CO
(Firm/Company)		FIAR PARTY PROPERTY P
1499 W Palmetto Park	Rd # 155	PM 2:57
1499 W PAInetto Park  (Address)  Boxa Ratin Fl 334  (City/State and Zip Code)	RC .	ATTENS 2: 57
For further information concerning this matter, plea	se call:	
(Name of Contact Person) at (Ar	954 ) 47/- 1599 ea Code & Daytime Telephone Number	<del>)</del>
Enclosed please find a check made payable to the F \$25 Filing Fee	lorida Department of State for:  \$55 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	

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	e limited liability company as it appears on the rec		. (
2. This limited lial	pility company was organized under the laws of:		
	ument/registration number of this limited liability 2800003976	company is:	
4. 1,	Abasi , hereby resign ,	as a <u>President</u> (Print Title)	
of this limited lia resignation in w	ability company and affirm the limited liability contriting.	mpany has been notified of my	
Signature of Re-	igning Member, Managing Member or Manager		
Filing Fee:	\$25.00 (Required)	OR SEP	
Certified Copy:	\$30.00 (Optional)	FILED TARY OF S OF CORPO	
		RATILE 2: 5	