

LO3000011307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

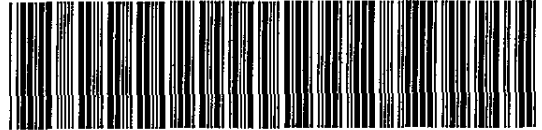
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Special Instructions to Filing Officer:

1/12 Mem Res.

LO3-11307

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FILED  
04 JAN 12 PM 12:55  
TOLSON, MIKE

Wednesday, January 07, 2004

Secretary of State  
Division of Corporations  
P.O. 6327  
Tallahassee, FL 32314

RE: RESIGNATION OF MEMBER / MANAGING MEMBER  
OF CONFIAR, LLC

To Whom It May Concern:

Please find enclosed the RESIGNATION OF MEMBER/ MANAGING MEMBER FOR CONFIAR, LLC together with a check payable to your order in the amount of \$ 25.00 (twenty five dollars) which represents the filing fee for the RESIGNATION OF MEMBER for a Florida Limited Liability Company

Your courtesy and cooperation in this regard, is most appreciated

Sincerely,

A handwritten signature in black ink, appearing to read 'Gabriel Muñoz', written over a horizontal line.

Gabriel Muñoz.  
For the Company.

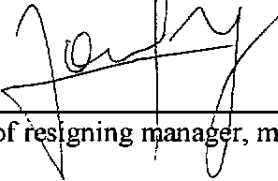
**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I, SERGIO FABIAN LAVIE, hereby resign as MANAGING MEMBER  
(Title)

of CONFIAR, LLC  
(Limited Liability Company)

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

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

  
\_\_\_\_\_  
(Signature of resigning manager, managing member or member)

**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

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TALLAHASSEE, FLORIDA