

U500000551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

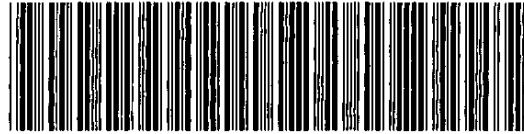
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400112554334

12/03/07--01022--018 \*\*100.00

FILED  
07 DEC -3 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DB  
12 03 07

LAW OFFICES

**JOHN HUME**

SUITE 402

1401 UNIVERSITY DRIVE

CORAL SPRINGS, FLORIDA 33071-6088

TELEPHONE 954-755-5154

FACSIMILE 954-755-5156

November 15, 2007

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


Re: Dafonti Nutripharm, LLC

Gentlemen:

Enclosed are four Resignations of Member, Managing Member or Manager for the above corporation. Our trust account check in the amount of \$100.00 for the filing fees is also enclosed.

If you have any questions or need additional information, please feel free to contact us.

Sincerely,



Legal Assistant

/bjh  
Enclosures

**FILED**  
07 DEC -3 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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

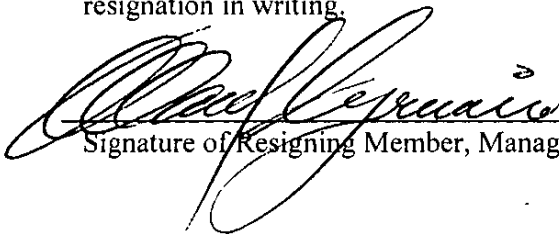
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: DAFONTI NUTRIPHARM, LLC

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

3. The Florida document/registration number of this limited liability company is:  
L05000000551

4. I, MANUEL NEGREIRA, hereby resign as a Managing Member  
*(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.

  
Signature of Resigning Member, Managing Member or Manager

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

**FILED**  
07 DEC -3 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA