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### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Navicon Unlimited LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Alicia Del Rey				
(Contact Person)				
Navicon Unlimited LLC				
(Firm/Company)				
3309 NW 97 Ave				
(Address)				
Miami, Fl. 33172				

For further information concerning this matter, please call:

(City/State and Zip Code)

Alicia Del Rey
(Name of Contact Person)

at (305) 592-7630
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

### 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

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## FILED

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SEGMETANT 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

	limited liability company as i icon Unlimited LLC	t appears on the records of	of the Florida Department	
2. This limited liabi	lity company was organized	under the laws of:		
3. The Florida docu LO50001004	ment/registration number of	this limited liability com	pany is:	
4. I, Francisco Gonzalez , 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.  Signature of Resigning Member, Managing Member or Manager				
	\$25.00 (Required) \$30.00 (Optional)			