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(Re	equestor's Name)	,
(Ac	ldress)	
(Ac	ldress)	
(Cil	ty/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
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SECRETARY OF STATE ON SINISION OF CORPORATIONS

J. BRYAN MAY 2 2 2006

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BRIGHT INFORMATION SUSTEMS (Name of Limited Liability Company)	
(Name of Entitled Enterthy Company)	
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are sub	mitted for filing.
Please return all correspondence concerning this matter to the following:	
Mauricio Jimenez	
(Name of Person)	
bright Information Systems UC	DIVISION OF CO
(Firm/Company)	THE SECOND
400 SW 203 Ave.	F CORPO
(Address)	orrati
Pembroke Pines FL 33029	CORPORATIONS 5 PH 4: 50
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Mavicio Siwerek at 305 215-2156 (Name of Person) (Area Code & Daytime Telephone)	· .
(Name of Person) (Area Code & Daytime Telephone	Number)
	τ, τ
STREET/COURIER ADDRESS: MAILING ADDRESS	₹•
Registration Section Registration Section	
Division of Corporation Division of Corporation	ns
Clifton Building P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32 Tallahassee, Florida 32301	314
ralianassee, riorida 32301	
Enclosed is a check for the following amount:	
\$25 Filing Fee \$\square\$\$\$\$ \$\square\$\$\$\$\$\$ \$\square\$	
Certified Copy	
CR2E079 (8/05)	



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

(Limited Liability Company) a limited liability company organized under the laws of the State of 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