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SECRETARY OF STATE
ANALYSES FROM

N. Outlingan FEB = 2 2012

COVER LETTER

Division of Corporations				
SUBJECT: ASTRA INVERSION,	LLC.			
(Name of Limited Liability Company)				
The enclosed member, managing member o filing.	r manager resignation and fee(s) are submitted for			
Please return all correspondence concerning	g this matter to:			
Aura Lopez				
(Contact Person)				
ASTRO INVERSION, LLC.				
(Firm/Company)				
12 NE 1 STREET				
(Address)				
MIAMI, FL 33132				
(City/State and Zip Code)				
For further information concerning this mat-	ter, please call:			
Aura Lopez	_ _{at (} 786) 474-8524			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable				
\$25 Filing Fee	\$55 Filing Fee &			
	Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

FILED 12 FEB - I AH ID: 29 SECRETARY OF STATE IALLAHASSEE, FLORIDA

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

	imited liability company as RA INVERSION, LL		of the Florida Department
2. This limited liabi	lity company was organized	l under the laws of:	
3. The Florida document L07000021	ment/registration number of 271	this limited liability comp	pany is:
4. I, Leonor H. A		, hereby resign as a	MGR
of this limited liab resignation in writ	Drawor Munt		(Print Title) has been notified of my
/	Ming Member, Managing M	lember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		