

L08000020346

(Requestor's Name)

(Address)

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TALLAHASSEE, FLORIDA

J. BRYAN

SEP 22 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocean Puki 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:

Lorena Kiperschmit
(Contact Person)

Ocean Puki LLC
(Firm/Company)

1360 Stillwater Dr
(Address)

Miami Beach FL 33141
(City/State and Zip Code)

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For further information concerning this matter, please call:

Lorena Kiperschmit at (305) 490 7942
(Name of Contact Person) (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



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: OCEAN PUKI LLC

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

3. The Florida document/registration number of this limited liability company is:
LO80000 20346

4. I, Lorena Kipersmit, hereby resign as a MGR
(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)

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TALLAHASSEE, FLORIDA