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B. BOSTICK
JUL **2 2** 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Javier Habbiolo agency UC (Name of Limited Liability Company)	
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.)r
Please return all correspondence concerning this matter to:	
Lawier Habbishow (Contact Person)	
Javier Masson b aquicy (Firm/Company)	
(Firm/Company)	
1111 Brickell Buy dr. apt 2911 (Address)	
(Address) *	2) 20 20
Mani, Fl 33131 (City/State and Zip Code)	
(City/State and Zip Code)	<u>_</u>
For further information concerning this matter, please call:	×
	Z = 10 × 2
(Name of Contact Person) (Name of Contact Person) (Area Code & Daytime Telephone Number)	אָ
Enclosed please find a check made payable to the Florida Department of State for: \$\omega\$ \$\subset\$ \subseteq \text{\$\subset\$ \$\subseteq\$ \$\subseteq\$ \$\subseteq\$ \$\subseteq\$ \$\subsete\$ \$\subseteq\$ \$\sub	
Certified Copy	
STREET/COURIER ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section	
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327	

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



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 lin of State is: <u>jau</u>			pears on the records of Seucy UC	f the Flo	orida De	partme	ent ·
2. This limited liabilit Florida	• • •	anized unde	er the laws of:		SECRE DARY	2013 JUL 19	-17
3. The Florida docum	ent/registration num) 55 3 25	ber of this	limited liability comp	any is:	CORRESPONDE	AM 10: 56	
4. I, Gema (Print Nam	De DÍOS e of Person Resigning)		, hereby resign as a _	Mar (P)	rint Title)	<u>r</u>	_
of this limited liabilities resignation in writing		irm the lim	ited liability company	has bee	en notifi	ed of r	ny
Signature of Resign	ing Member, Manag	ging Memb	er or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)						