L1000010802-1

(Red	questor's Name)				
(Add	dress)				
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(City	//State/Zip/Phone	= #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

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2011 SEP 22 MIN 01
SECRETARY OF STATE

T. CLINE
SEP 23 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TOTAL ART LLC		
	ited Liability Company)	<u> </u>
The enclosed member, managing member or filing.	manager resignation and fee(s) are subm	itted for
Please return all correspondence concerning	this matter to:	
HAROLD EMELANDER		
(Contact Person)		
HLE BADELL, PA		
(Firm/Company)		3 00 3
4700 Biscayne Blvd, Suite 500		MII SEP 22 MICE ON SECRETARY OF STATE FALLAHASSEE, FLORID
(Address)		P 2:
Miami, FL 33009		SEE, I
(City/State and Zip Code)		TST ST
For further information concerning this matter	er, please call:	RIDA RIDA
HAROLD EMELANDER	at (305) 573 0850	
(Name of Contact Person)	(Area Code & Daytime Telephone Numb	per)
Enclosed please find a check made payable to \$25 Filing Fee	o the Florida Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 3231	4

CR2E079 (5/06)

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 of State is:	limited liability company as it FAL ART LLC	appears on the record	s of the Florid	da Depar	tment
2. This limited liab	vility company was organized u	nder the laws of:		A s	
3. The Florida doc L100001080	ument/registration number of th	is limited liability cor	mpany is:	EGRETARY OF	2011 SEP 22 821
4. I, Miguel A. Dia		, hereby resign as a	Member	FLOR	
·	lame of Person Resigning) bility company and affirm the liting.	imited liability compa	,	Tid要mi notified o	f my
Signature of Resi	gning Member, Mariaging Mer	nber or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				

STATEMENT OF RESIGNATION TOTAL ART, LLC

I, Miguel Diaz, a member of Total Art, LLC, give my written consent to authorize Total Art, LLC to remove myself as a 30% owner from Total Art, LLC as well as to no longer serve as a Managing Member of Total Art, LLC.

My ownership interest of 30% percent shall be allocated exclusively to Franklin Sequera.

As of this date, I'm no longer a 30% owner of Total Art, LLC nor a Managing Member of Total Art, LLC.

CORTESY TRANSLATION:

Yo, Miguel Díaz, miembro de la compañía Total Art, LLC, doy mi consentimiento expreso para autorizar a Total Art, LLC a que me remuevan de la compañía, en mi respectivo porcentaje de 30% de Total Art, LLC, así para no ser Miembro Gerente de la misma.

Mi porcentaje de 30% será traspasado en su totalidad y de manera exclusíva a Franklin Sequera.

Al día de hoy, declaro ya no ser el dueño del 30% de Total Art, LLC ni Miembro Gerente.

Minuel Diaz

Date:

SECRETARY OF STATE