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(Re	questor's Name)	_			
(Ad	dress)				
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(Cit	y/State/Zip/Phone	= #)			
PICK-UP	WAIT	MAIL			
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(Bu	siness Entity Nan	ne)			
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Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
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J. SAULSBERRY EXAMINER

OCT 29 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lumley Software Solutions, LLC	
(Name of Limited Liability Company)	
The enclosed member, managing member or manager resignation and filing.	fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Hector Abrahams and Estebana Jerez	•
(Contact Person)	
Abrahams Financial	28 TAI
(Firm/Company)	LL X 0
8010 Sunport Dr. Suite # 120	BHZ OCT 25 SELMILLANN ALL ANNASSI
(Address)	india
Orlando, FL 32809	SH-900
(City/State and Zip Code)	10ρ 10ρ
For further information concerning this matter, please call:	
Estebana Jerez at (407) 277.86 (Name of Contact Person) (Area Code & Daytime	
Enclosed please find a check made payable to the Florida Department \$25 Filing Fee Certified	ree &
Registration Section Registration Division of Corporations Division of Clifton Building P.O. Box	G ADDRESS: on Section of Corporations 6327 ce, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	nited liability company as it ap by Software Solutions,		of the FI	orida D	epartm	ent
2. This limited liability Florida	y company was organized und	er the laws of:		TALL AHASS	2012 OCT 25	j - me
3. The Florida docum	ent/registration number of this	limited liability con	npany is:	SEE, FLORI	5 KM 9:00	\$
4. I, Henrique Ste	obiecki e of Person Resigning)	, hereby resign as a	Memb	er rint Title		_
	ity company and affirm the lim	ited liability compar	•	•		ny
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	v=3-					
Signature of Resign	ing Member, Managing Memb	er or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					