

A0300000 1783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

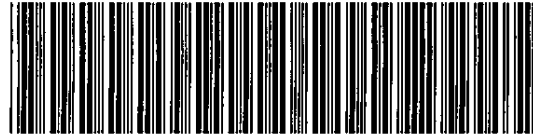
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pure Futbol, LTD
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A03000001783 **FEL#:** 550855864

The enclosed Statement of Dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Rafael Ferreiro
(Contact Person)
Pure Futbol, LTD
(Firm/Company)
2500 NE 48th Lane, APT #608
(Address)
Ft. Lauderdale, Fl. 33308
(City, State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Leo Vega at (305) 336-4637
(Name of Contact Person) (Area Code and Daytime Telephone Number)

- \$52.50 Filing Fee \$105.00 Filing Fee and Certified Copy.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**STATEMENT OF DISSOCIATION
FOR
GENERAL PARTNER
OF
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

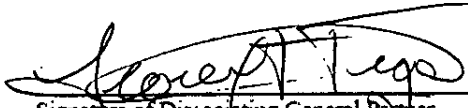
Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

Pure Futbol, LTD

2. The name of the dissociating general partner is:

Leo Vega



Signature of Dissociating General Partner

AUGUST 15TH 2006

Filing Fee: \$52.50
Certified Copy (optional): \$52.50

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TALLAHASSEE, FLORIDA