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SECRILIANT OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Enco, LLC	nted Liability Company)
(control of Line	and sideling Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Wilson Sanchez	
(Name of Person)	
Enco II C	
(Firm/Company)	
•	
990 Washington Street	
(Address)	
Hollywood, FL 33019	
(City/State and Zip Code)	
For further information concerning this matter, pl	ease call:
Wilson Sanchez	at (954) 445-0579
(Name of Person)	at (954) 445-0579 (Arca Code & Daytime Telephone Number)
(MARING OF LOISON)	(Arca Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	•
✓\$25 Filing Fee	\$55 Filing Fee &
CR2E079 (8/05)	Certified Copy
ALTONO LA TOLOGA	





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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Oscar Fernandez	, hereby resign as Manager Member
	(Title)
of Enco, LLC	
	Limited Liability Company)
a limited liability company organized	under the laws of the State of Florida
and affirm that the limited liability con	mpany has been notified in writing of the resignation.
+ 41	and the state of t
(Signature of resigning	ng manager, managing member or member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2E079 (8/05)

