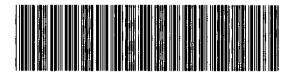
103000024

(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
	siness Entity Name	e)
Certified Copies	Certificates o	of Status
Special Instructions to Filing Officer:		

Office Use Only



900162578279

.i/09/09--81065--002 **25.00

FILED NON-9 M 9: 23 SECRETARY OF STATE SECRETARY OF STATE

S. HAWKES NOV 1 0 2009 EXAMINER S. HAWKES

NOV = 9-2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Idealspace, LLC (Name of Limited Liability Co	mpany)		
The enclosed member, managing member or manager resifiling.	gnation and fee(s) are submitted for		
Please return all correspondence concerning this matter to	:		
Humberto E. Ruiz			
(Contact Person)			
(contact i strony			
Ruiz & Company			
(Firm/Company)	-		
2385 Executive Center Dr. #100 (Address)			
D D EI 22/21			
Boca Raton, FL 33431 (City/State and Zip Code)			
(City/state and Esp Code)			
For further information concerning this matter, please call:			
	\		
) <u>443-7191</u> e & Daytime Telephone Number)		
(Maine of Contact Leison) (Mica Cou	e & Baytime Telephone (Valider)		
Enclosed please find a check made payable to the Florida	Department of State for:		
	\$55 Filing Fee &		
, A variable of the control of the c	Certified Copy		
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 32314		
Tallahassee, Florida 32301			

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

ars on the records of the Florida Departmen
the laws of:
nited liability company is:
ereby resign as a <u>Member</u>
(Print Title)
ed liability company has been notified of my
or Manager
- -

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee: Certified Copy: