	(Reque	stor's Name)	
	(Addres	ss)		
	(Addres	55)	<u>. </u>	
	(City/St	tate/Zip/Pho	ne #)	
PICK-U	- [WAIT	MAIL.	
	(Busine	ess Entity Na	ame)	
	(Docum	nent Numbe	r)	
Certified Copies		Certificate	es of Status	<u>_</u>
Special Instructions	s to Filin	-	1 Ib	
		A. L	UNT	
		SEP 1	4 2011	
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Office Use Only



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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: ADVANCED ELECTRONIC COMP	
(Name of Limited Liability Comp	oany)
The enclosed member, managing member or manager resign filing.	ation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
lleana Marrero Rodriguez, Esq.	matt
(Contact Person)	
	AS AS
Lusky & Rodriguez, P.A.	PH SEP 13 AM
(Firm/Company)	ပို့ဆို မ
OOA Almania Assaulta Ootia OAE	<u> </u>
301 Almeria Avenue, Suite 345	
(Address)	(9위 년 - 1 기대 - 1 기대
Coral Gables, Florida 33134	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Hanna Marrana Badrimaan	440 4045
	442-1245
(Name of Contact Person) (Area Code &	Daytime Telephone Number)
Enclosed please find a check made payable to the Florida De	partment of State for:
	5 Filing Fee &
	Certified Copy
CODEST/COLUMN ADDRESS.	MAILING ADDRESS:
	Registration Section
•	Division of Corporations
	O. Box 6327
2661 Executive Center Circle	Callahassee, Florida 32314
Tallahassee, Florida 32301	· · · · · · · · · · · · · · · · · · ·

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CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		2911
2. This limited lial FLORIDA	pility company was organized under the laws of:	2011 SEP 13 SEPORETARY
3. The Florida doc L0300003	ument/registration number of this limited liability company is 0907	
_{4. I,} Electrochi		aging Member
,	Name of Person Resigning) Bility company and affirm the limited liability company has b	(Print Title)
Signature of Res	igning Member, Managing Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	