103000032979

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(Address)					
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(City/State/Zip/Phone #)					
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T. CLINE

OCT 20 2008

EXAMPLEA

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Housedie	et, LLC.			
	(Name of Limited L	iability Cor	mpany)	
The enclosed member, managing filing.	g member or man	ager resig	gnation and fee(s) a	re submitted for
Please return all correspondence	concerning this	matter to:		
Mr. Jorge Cata				
(Contact Pers	ion)		_	
(Firm/Compa	any)		_	200 S
9737 NW 41st St, #131				DI OCT
(Address)			_	17 ASS
Doral, FL 33178				2008 OCT 17 AM 10: 57 SECRETARY OF STATE TALLAHASSEE.FLORID
(City/State and Z	lip Code)		_	ORAL S
For further information concerni	ng this matter, pl	lease call:		P 1
Jorge Cata	at (786	427-3000	
(Name of Contact Perso	n) (Area Code	& Daytime Telepho	ne Number)
Enclosed please find a check ma \$25 Filing Fee			Department of State \$55 Filing Fee & Certified Copy	e for:
STREET/COURIER ADDRES	SS:		MAILING ADD	RESS:
Registration Section			Registration Secti	
Division of Corporations			Division of Corpo	orations
Clifton Building			P.O. Box 6327	1 20214
2661 Executive Center Circle Tallahassee, Florida 32301	•		Tallahassee, Flori	da 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS Housediet, LLC.

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

	limited liability company as HOUSEDIET, LLC.	it appears on the records	of the Flo	orida De	partme 	nt -•
	oility company was organized rida	under the laws of:		SECRE	2008 OCT 17	ratife gall
	ument/registration number of 03000032979	this limited liability com	pany is:	TARY OF S	T 17 AM 10: 57	
	CATA Name of Person Resigning)	, hereby resign as a		age SAT	9: 57 —	_
	bility company and affirm the	e limited liability compar	·		ed of m	ıy
Signature of Res	igning Member, Managing N	1ember or Manager				
Filing Fee:	\$25.00 (Required)					
Certified Copy:	\$30.00 (Optional)					