L04 0000 33078

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(Re	questor's Name)	
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(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Name)	1
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(Do	cument Number)	
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Certified Copies	Certificates of	Status
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Special Instructions to f	Filing Officer:	
Special Instructions to I	Filing Officer:	
Special Instructions to F	Filing Officer:	
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COVER LETTER

SUBJECT: M& M Invistments LLC (Name of Corporation)			
DOCUMENT NUMBER:			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing	5 .		
Please return all correspondence concerning this matter to the following:			
LISSIS Ramos (Name of Person)			
M& M Investments LLC (Name of Firm/Company)			
4371 SW 13 Terr (Address)	SECF	07 M	
Hiami, Fl 33134 (City/State and Zip Code)	HASSEY!	MAR-6	=
For further information concerning this matter, please call:		4	5
LIGSIS ROMOS at (305) 331-4080 (Area Code & Daytime Telephone Number)	HANGE HANGE	9: 55	

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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TO:

Amendment Section Division of Corporations

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 23, 2007

LISSIS RAMOS 4371 SW 13 TERR MIAMI, FL 33134

SUBJECT: M & M INVESTMENTS LLC

Ref. Number: L04000033078

We have received your document for M & M INVESTMENTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 107A00013446

MAR -6 AM 9:5

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company	as it appears on the record	ds of the Florid	a Departn	nent
	oility company was organi	zed under the laws of:		SECRETARY OF TALLAHASSEE, F	07 MAR -6 AF
	ument/registration numbe のろ3079	r of this limited liability co	ompany is:	F STATE FLORIDA	AM 9: 55
4. I, <u>Lissis</u> (Print N	RAMOS Jame of Person Resigning)	, hereby resign as	a MGK	Title)	_
of this limited lia resignation in wr		the limited liability comp	any has been no	otified of	my
Signature of Res	Igning Member, Managing	g Member or Manager			
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)				