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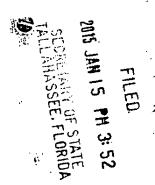
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COVER LETTER

Registration Section Division of Corporations

SUBJECT: Mapuche, LLC		
Name of Limited Liability Company		
DOCUMENT NUMBER: L04000082084		
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted	
Please return all correspondence concerning this matter to the	e following:	
Allen M. Levine		
Name of Person		
Becker & Poliakoff, P.A.		
Name of Firm/Company		
1 East Broward Blvd., Suite 1800		
Address		
Ft. Lauderdale, FL 33301		
City/State and Zip Code		
alevine@bplegal.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Allen M. Levine	987-7550	
Name of Person Area Code	Daytime Telephone Number	
Enclosed is a check made payable to the Florida Department liability company or \$25.00 for an administratively dissolved liability company.	of State for \$85.00 for an active limited	

STREET ADDRESS:

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Registration Section

Clifton Building

INHS17 (2/14)

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Registration Section

P.O. Box 6327

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITM COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Becker & Poliakoff, P.A.

Name of Registered Agent

Registered Agent for

Name of Limited Liability Company

L04000082084

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Signature of Resigning Agent

If signing on behalf of an entity:

Becker & Poliakoff, P.A.

Typed or Printed Name

Tel 9.5 (2 Web)

FILING FEES:

Capacity

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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