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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
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JULIAN SEE FLORIDA

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EFFER JAN 1 9 STORE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PINK OCEAN LLC (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
WILLIAM ROGERS ESQ (Name of Person)
BARRETT ROGERS + ASSOCIATES, P.A. (Firm/Company)
801 NE 167TH STREET, SECOND FLOOR
NORTH MIRMI BEACH, FL 33162 (City/State and Zip Code)
For further information concerning this matter, please call:
WILLIAM ROGERS at (305) 455 - 2040 (Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAG

I, ADRIANA TORRES, hereby resign as NAWAGER		
(Title)		
of PINK OCEAN LLC (Limited Liability Company)		
a limited liability company organized under the laws of the State of FLORIDA,		
and affirm that the limited liability company has been notified in writing of the resignation.		
Jan 7		
(Signature of resigning manager, managing member or member)		

FILING FEE IS \$25.00

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