## #10500032503

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(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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K. SALY EXAMINER MAR 24 2011

## **COVER LETTER**

TO:	_	Registration Section Division of Corporations			
	DIVIS	sion of Corporations	,		
SUBJ	ECT:	ADVANCED INNOVA	<del> </del>		
		(Name of Li	mited Liability Co	ompany)	
The enfiling.		I member, managing member of	or manager resi	gnation and fee(s) are submitted for	
Please	return	all correspondence concerning	g this matter to	:	
Stua	art M.	Gold, Esq.			
		(Contact Person)		<del></del>	
Sax,	Willi	nger & Gold			
		(Firm/Company)		_	
5801	1 N.V	V. 151 Street, Ste. 307			
•		(Address)	٠		
Miar	ni La	kes, FL 33014			
		(City/State and Zip Code)		_	
For fu	rther ir	nformation concerning this ma	tter, please call	:	
Stua	rt M.	Gold	_ at (_ 305	591-1040 Ext. 204	
	(N	ame of Contact Person)	(Area Cod	e & Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payable  √ \$25 Filing Fee		Department of State for: \$55 Filing Fee & Certified Copy	
		OURIER ADDRESS:		MAILING ADDRESS:	
_		Section		Registration Section	
		Corporations		Division of Corporations	
	n Build Executi	ve Center Circle		P.O. Box 6327 Tallahassee, Florida 32314	
		Florida 32301		i ananassee, Fiorida 32314	

CR2E079 (5/06)



FILED
11 MAR 22 PM 12: 07
SECRLIARY DE STATE
TALLAHASSEE, EL ORIDA.

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		it appears on the records of t		
2. This limited lial Florida	pility company was organized	d under the laws of:		
3. The Florida doc <u>L0500003</u>		f this limited liability compan	y is:	
<sub>4. l,</sub> Jose A. R	ego	, hereby resign as a MGRM		
	Name of Person Resigning)	,,,	(Print Title)	
of this limited lia resignation in w		e limited liability company h	as been notified of my	
Signature of Res	igning Member, Managing M	dember or Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			