10500043327

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
V.		
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	124
Daria		
0	Office Use Onl	у



100077511901

07/21/06--01030--007 **575.00

PILED

06 JUL 21 AH 10: 04

SECRETARY OF STATE
FALLAHASSEE, FLORING

Law Offices of

ANTHONY DIEGUEZ, P.A.

Telephone (305) 556-4106 Facsimile (305) 362-3902 Royal Oaks Professional Center 7950 N.W. 155th Street, Suite 207 Miami Lakes, Florida 33016

June 20, 2006

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

SUBJECT: Resignation of Manger of LLC's

Dear Sir or Madam:

The enclosed Resignations of Manager and fees are submitted for filing for the twenty-three (23) following Limited Liability Companies:

- Paramount 8, LLC
- Big 47, LLC
- Big Cypress, LLC
- Big Onyx, LLC
- Parabay 4, LLC
- Bentley 618, LLC
- MIM 477 Investments, LLC
- Big Santo Domingo, LLC
- Big Le Jeune, LLC
- Big Havana, LLC
- Mausa, LLC
- Rimali, LLC
- Mauro 47, LLC
- Costalin, LLC
- Lijai, LLC
- Solaris 2302, LLC
- Malui, LLC
- My First 977, LLC
- Big Tamiami One, Corp.
- MIM Grove, LLC
- ★ Engle 27505, LLC
 - Bella 2904, LLC
- Big Riviera, LLC

Enclosed is a check in the amount of \$575.00 representing your \$25.00 filing fee for each resignation.

Registration Section
 Division of Corporations
 June 20, 2006
 Page Two (2)

Please return all correspondence concerning this matter to the following:

ANTHONY DIEGUEZ, P.A. 7950 NW 155 St., Suite 207 Miami Lakes, FL 33016

For further information concerning this matter, please call Anthony Dieguez, J.D., or his staff at (305) 556-4106.

Should you have any questions please do not hesitate to contact our office.

Yours/cordially,

ANTHONY DIEGUEZ, J.D.

At\/dla

Enclosures-

MANAGER RESIGNATION FOR A LIMITED LIABILITY COMPANY

I, CONSTANZA PROFETA, hereby resign as Manager of PARAMOUNT 8, LLC, Document

No. <u>L05000043327</u>, a limited liability company organized under the laws of the State of Florida, and affirm that the limited liability company has been notified in Dated this <u>1</u> day of June, 2006. writing of the resignation.

(Signature of resigning Manager)

FILING FEE IS \$2 5.00

Make Checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

06 JUL 21 AM IO: 04
SECRE (ASY OF STATE