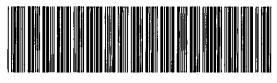
## 105 000044472

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
. (Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it a of State is: DEIAN HOLDING, LLC	appears on the records of the Florida Department
2. This limited liability company was organized un FLORIDA	der the laws of:
3. The Florida document/registration number of thi L05000044472	
4. I, MARIA FLORENCIA VINACCIA (Print Name of Person Resigning)	
of this limited liability company and affirm the line resignation in writing.	mited liability company has been notified of my
Signature of resigning Member, Managing Mem	lber or Manager

\$25.00 (Required) \$30.00 (Optional)

Filing Fee: Certified Copy: