(Re	equestor's Name)				
(Ad	ldress)				
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(Cit	ty/State/Zip/Phone	e #)			
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TO: Registration Section

Tallahassee, Florida 32301

CR2E079 (5/06)

Division of Corporations		
SUBJECT: MAMSA/OLMOS HOLDI	NG COMPANY, LLC	
	Liability Company)	
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for	
Please return all correspondence concerning this	s matter to:	
MIRTHA VALDES MARTIN CPA		
(Contact Person)	70-00 (8) (71-00-00 (8)	
	O7	
(Firm/Company)	JAN CRET LAHA	
420 S COUNTRY CLUB ROAD	22 ARY ASSI	
(Address)	TO PH	
LAKE MARY, FL 32746	O7 JAN 22 PM 3: 13 SECRETARY OF STATE ALLAHASSEE FLORIDA	
(City/State and Zip Code)	→ ω	
For further information concerning this matter,	please call:	
MIRTHA VALDES MARTIN CPA _{at}		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the \$\sqrt{25}\$ Filing Fee	se Florida Department of State for: \$55 Filing Fee &	
V 420 / ming 1 00	Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		t appears on the records of the ING COMPANY, LLC		Depa	artme	nt
	ility company was organized	under the laws of:	HE CHIMOSE	SECRETARY (07 JAN 22 1	
3. The Florida docu L05000058	•	this limited liability company	is: ירנואוטא	FSTATE	PH 3: 13	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4. I, RADOLFO	OLMOS	, hereby resign as a MG	RM			
(Print Name of Person Resigning)		,	(Print Tit	int Title)		
of this limited liab resignation in wri		limited liability company has	s been not	ified	of m	y
Signature of Rest	gning Member, Managing Me	ember or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					