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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Toro Accounting & Consulting		
(Name of Lim	ited Liability Company)	
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to:	
Margarita Jimenez		
(Contact Person)		
Toro Accounting & Consulting Services	LLC	
(Firm/Company)		
1540 International Parkway, Suite 2000		
(Address)		
Lake Mary, FL 32746		
(City/State and Zip Code)		
For further information concerning this matt	er, please call:	
Margarita Jimenez	321 363-4246	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:  \$\Bigsize \text{\$\subset}\$ \text{\$\subset}		
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	

CR2E079 (2/14)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as	it appears on the records of the Florida Department
of State is:	Accounting & Consulting	Services, LLC
2. The Florida docs	•	ssigned to this limited liability company is: 25
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is:
4. I, Cesar A. Tor	Olame of Person Resigning)	, hereby withdraw/resign as a
Managing Me		_
-	(Print Title)	
of this limited lia resignation in wr		ne limited liability company has been notified of my
Signature of D	issociating Member or Resig	ning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	