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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

T F M D

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lenco Rough Diamonds LLC (Name of Limited Liability Comp	pany)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Member or Ma	nager and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following	llowing:
Gregory Claude Brown	_
(Name of Person)	- -
Lenco Rough Diamonds LLC	
(Firm/Company)	
245 Fordham Drive	
(Address)	-
Lake Worth, FL 33460	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	5.
Gregory C. Brown at 6561) 588-9407 AR CC ADaytime Telephone Number CC
	& Daytime Telephone Number
	ac Daytime Telephone (Vagyor)
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Registration Section Division of Corporations	MAILING ADDRESS: TS & Confidence of Registration Section & Compositions & Confidence of Compositions & Confidence of Confidence
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: TS & & Registration Section & & Division of Corporations P.O. Box 6327
Registration Section Division of Corporations	MAILING ADDRESS: TS & Confidence of Registration Section & Compositions & Confidence of Compositions & Confidence of Confidence
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: TS & & Registration Section & & Division of Corporations P.O. Box 6327
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: TS & & Registration Section & & Division of Corporations P.O. Box 6327



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

լ _, Gregory Claude Brown	, hereby resign as President/ CEO		
	(Title)		
of Lenco Rough Diamonds LLC			
(Limited Liability	y Company)		
a limited liability company organized under the law	s of the State of Florida		
and affirm that the limited liability company has been notified in writing of the resignation.			
(Signature of resigning manager, m	panaging member or member)		

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE