÷., z (Requestor's Name) (Address) 500076046435 (Address) (City/State/Zip/Phone #) 169- 1 PICK-UP WAIT MAIL 06/12/06--01038--005 **55.00 (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status 06 JUN 12 Special Instructions to Filing Officer: PH 1:43 ΰ Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

g nage ma (Firm/Company) AVE NWIDD (Address) $[[f_i, \xi_i]] \to [[f_i, \xi_i]]$ Code)

For further information concerning this matter, please call:

 $\frac{120}{n} \qquad \text{at} \underbrace{(305)}_{(\text{Area Code & Daytime Telephone Number})} \underbrace{742-1076}_{(\text{Area Code & Daytime Telephone Number})}$

STREET/COURIER ADDRESS: Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Enclosed is a check for the following amount:

\$25 Filing Fee

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

\$55 Filing Fee & Certified Copy

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,	Bernardo AMARO	, hereby resign as	TREASURER
			(Title)
of	JDP Management. (Limited Liabil	<u>LLC</u>	,
(Limited Liability Company)			
a limited liability company organized under the laws of the State of <u>the londa</u> ,			

and affirm that the limited liability company has been notified in writing of the resignation.

man -)

(Signature of resigning manager, managing member or member)

06 JUH 12 PH 1:

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

CR2E079 (8/05)