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(Requestor's Name) (Address) (Address)	500081449615
(City/State/Zip/Phone #)	11/06/0601015002 ***35.00 SECRETARY OF STATE ALLAHASSEE FLORIDA
Office Use Oply WWS	

## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

ţζ LC SUBJECT: (Name of Limited Liability Company)

Dear Sir or Madam:

-0.7 PM 12: 06 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:

EONALD J. SANTOKO (Name of Person)

CA GLOBA TRADING LLC (Firm/Company)

ON.W. OST

ATON. 12-33432

For further information concerning this matter, please call:

Area Code & Daytime Telephone Number) (Name of Person)

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:

**19**\$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, SANTOKO, J. LEONAR hereby resign as MANAG NG NOV -6 PH 12: 06 (Title) of\_ (Limited Liability Company) a limited liability company organized under the laws of the State of \_ -1 0(4) and affirm that the limited liability company has been notified in writing of the resignation. .:

(Signature of resigning manager, managing member or member)

125.00 FILING FEE IS \$25.00

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

CR2E079 (8/05)