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SECRETARY OF STATE

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COVER LETTER

_	stration Section sion of Corporations			
SUBJECT:	Hermosa Enterprises L		· · · · · · · · · · · · · · · · · · ·	
	(Name of Lim	ited Liability Company)		
The enclosed filing.	d member, managing member or	manager resignation and fo	ee(s) are submitted fo	r
Please return	all correspondence concerning	this matter to:		
Scott Sa	nders			
	(Contact Person)			
Hermosa	Enterprises LLC		ZOI SE TAL	
	(Firm/Company)		CRE J	T
14561 D			2001 JUL 24 SECRETARY	1
	(Address)		E OF D	T
Alva FI 3	3920		A 8: 07 OF STATE E, FLORIDA	-
	(City/State and Zip Code)		A I	
For further i	nformation concerning this matt	er, please call:		
Scott Sa	nders	at (239) 851957	73	
(1)	Name of Contact Person)	(Area Code & Daytime T	'elephone Number)	
Enclosed ple	ease find a check made payable t \$25 Filing Fee	to the Florida Department of \$55 Filing Fe	ee &	
STREET/C	COURIER ADDRESS:	MAILING ADDRESS:		
Registration			Registration Section	
	Corporations	Division of Corporations		
Clifton Buil	-	P.O. Box 6327		
	tive Center Circle	Tallahassee	, Florida 32314	
Tallahassee,	, Florida 32301			

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as mosa Enterprises LL		of the Florida	Department
-	ility company was organized		2001 JUL 24 . SECRETARY O TALLAHASSEE.	
3. The Florida doci	ument/registration number of	this limited liability comp	A 8: 07 F STATE FLERIDA	O
4. I, Scott Sand	ters	, hereby resign as a	Managing	<u>Member</u>
(Print Name of Person Resigning)		(Print Title)		
of this limited lial resignation in wr	bility company and affirm th iting.	e limited liability compan	y has been not	ified of my
Sust Sono	lers			
Signature of Resi	gning Member, Managing N	lember or Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			