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Florida Department of State
Division of Corporations
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(((H10000059290 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SCHUTT LAW FIRM, P.A.
Account Number : I20040000017
Phone : (239) 540-7007
Fax Number : (239) 791-1080

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

10 MAR 16 PM 2:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SIREN'S OASIS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$55.00

S. HAWKES

MAR 17 2010

EXAMINER

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FAX AUDIT NO. H10000059290 3



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
10 MAR 16 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

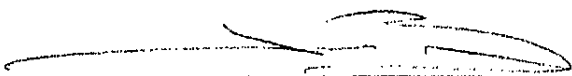
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: SIREN'S OASIS, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L06000000029

4. I, JOSE BASERVA, hereby resign as a Managing Member
(Print Name of Person Resigning) *(Print Title)*

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



Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)