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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICES OF STEINBERG & ASSOCIATES, P.A.

Account Number : I19980000080

: (305)538-2344

Fax Number

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

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| COV | ER LETTER |
| TO: Registration Section Division of Corporations | |
| SUBJECT: USD HOLDINGS, LLC | |
| (Name of Lin | nited Liability Company) |
| The enclosed member, managing member o filing. | r manager resignation and fee(s) are submitted for |
| Please return all correspondence concerning | g this matter to: |
| Paul B. Steinberg, Esq. | |
| (Contact Person) | |
| Steinberg & Associates, P.A. | |
| (Firm/Company) | |
| 767 Arthur Godfrey Road | |
| (Address) | - |
| Miami Beach, FL 33140 | |
| (City/State and Zip Code) | |
| For further information concerning this mat | ter, please call: |
| Dinorah Cardenas | at (305) 538-2344 |
| (Name of Contact Person) | at (305) 538-2344 (Area Code & Daytime Telephone Number) |
| England sloops find a shoot made no ship | to the Florida Denombrant of State Con- |
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| Division of Corporations | Division of Corporations |
| Clifton Building 2661 Executive Center Circle | P.O. Box 6327 |
| Tallahassee, Florida 32301 | Tallahassee, Florida 32314 |
| A MAINTENNESS A AVAINGE SESVE | |
| CR2E079 (5/06) | |

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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 i D HOLDINGS, LLC | appears on the records of | of the Florida Department |
|--|---|----------------------------|-----------------------------|
| 2. This limited liab | ility company was organized t | under the laws of: | |
| 3. The Florida doc L0600000 | ument/registration number of t | his limited liability comp | pany is: |
| 4. I, Fabrizio M | arqu Rossi Longhi ame of Person Resigning) | , hereby resign as a | Freasurer/Mgr (Print Title) |
| of this limited lia resignation in wr | bility company and affirm the lting. | limited liability company | has been notified of my |
| Sulm | Poli Felto | · · | |
| Signature of Resi | gning Member, Managing Me | mber or Manager | · |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | · | 12 JU |

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