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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations		
SUBJECT: ONE SERVICE FINANCIAL & (Name of Limited Liabil		
The enclosed member, managing member or manage filing.	r resignation and fee(s) are submitted for	
Please return all correspondence concerning this matt	ter to:	
JORGE A. RODRIGUEZ, CPA		
(Contact Person)		
J.A. RODRIGUEZ, CPA, LLC	DI JAN 30 SECRETARY	
(Firm/Company)	ATA W	
6401 SW 87TH AVENUE, SUITE 210		
(Address)	STA 2:	
MIAMI, FL 33173	ADA 44	
(City/State and Zip Code)		
For further information concerning this matter, please	e call:	
	86 <u>357-1053</u>	
(Name of Contact Person) (Area	a Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Flo	\$55 Filing Fee &	
	Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive 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

the Flori	da Dep	oartment
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as been	notified	d of my
	SECRETARY OF STARTED A	2007 JAN 30 P SECRETARY OF S TALLAH ASSEE, FL

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