## L060000035457

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
		,

Office Use Only



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OR NOV 17 PH 2: 58

J. BRYAN

NOV 1 8 2008

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: PRONTOGC, LLC	
(Name of Limited	Liability Company)
The enclosed member, managing member or ma filing.	nnager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
PERLA CALAS	ا ماران المسر
(Contact Person)	
PERLA SOLE CALAS, PA	08 NOV 17 PM 2: 58
(Firm/Company)	
15450 NEW BARN ROAD, # 30	02
(Address)	<b>O</b>
MIAMI LAKES, FLORIDA 3301	4
(City/State and Zip Code)	
For further information concerning this matter, j	please call:
GUILLERMO ANTONINI at	( 786 ) 621-5615
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$\forall \square \squ	ne Florida Department of State for: \$55 Filing Fee &
(X) \$25 Fining Fee	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	7.O. BOX 0327 Tallahassee Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## 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 reco	ords of the Florida Department
2. This limited liability company was organized under the laws of:  STATE OF FLORIDA	company is:
3. The Florida document/registration number of this limited liability <u>L06000035457</u>	company is:
4. I. LEONARDO AMBARD hereby resign a	as a MANAGER
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the limited liability con resignation in writing.	npany has been notified of my
Signature of Resigning Member, Managing Member or Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	