1060000 39639

(Re	equestor's Name)			
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SECRETARY OF STATE

COVER LETTER

_	stration Section ion of Corporations			
SUBJECT:	Tienda Mexicana	Mari LLC	npany)	
The enclosed filing.	I member, managing member	r or manager resig	nation and fee(s) are submitted fo	r
Please return	all correspondence concerni	ing this matter to:		
Ester O	SOrio (Contact Person)		-	TALL "
<u>Tienda</u> l	Mexicana Mari LL(<u> </u>	_	٠
	NW Hwy 19 (Address)	<u> </u>		
	(City/State and Zip Code)	natter, please call:	_	
Ester O	_	at (352	2 & Daytime Telephone Number)	
Enclosed ple	ease find a check made payab		Department of State for: \$55 Filing Fee & Certified Copy	
Registration Division of (Clifton Build 2661 Execut	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

THOM EQUIPMENT OF THE OFFICE OF THE	
1. The name of the limited liability company as it ap of State is: TIENDA MEXICANA MA	pears on the records of the Florida Department ARILLC er the laws of:
2. This limited liability company was organized under Florida	er the laws of:
3. The Florida document/registration number of this L06000039639	limited liability company is:
4. I, Tammie Wallace	, hereby resign as a Manager
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the lim	nited liability company has been notified of my
resignation in writing.	
Damyie le aleace	
Signature of Resigning Member, Managing Memb	er or Manager
Filing Fee: \$25.00 (Required)	
Certified Copy: \$30.00 (Optional)	