

**LD6000066521**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

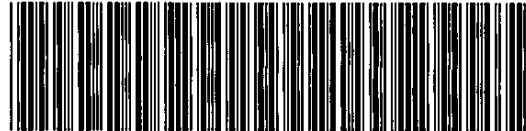
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06 OCT 19 AM 10:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 20, 2006

ABEL PEREZ  
126 S. FORSYTH ROAD  
ORLANDO, FL 32807

SUBJECT: MAIR DISTRIBUTORS, LLC  
Ref. Number: L06000066521

We have received your document for MAIR DISTRIBUTORS, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong form was completed.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 006A00056285

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MAIR Distributors, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Abel PEREZ  
(Name of Person)

MAIR Distributors, LLC  
(Firm/Company)

126 S. Forsyth Road  
(Address)

Orlando, FL 32807  
(City/State and Zip Code)

For further information concerning this matter, please call:

Abel PEREZ at (407) 551-0653  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I, VALERIO PEREZ, hereby resign as MGR  
(Title)  
of MAIR DISTRIBUTORS, LLC,  
(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA,  
and affirm that the limited liability company has been notified in writing of the resignation.

*Valerio Perez*  
(Signature of resigning manager/managing member or member)

FILED  
06 OCT 19 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE IS \$25.00**

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314