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COVER LETTER

TO: Registration Section Division of Corporations	•	
	iability Company)	
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for	
Please return all correspondence concerning this	matter to:	
SERVILIO SANTANA (Contact Person)		
O.M.S. TRUCKIA	is, ll	
2780 COUNTLAND (Address)	Blvd	
DELTOND EL 35 (City/State and Zip Code)		
For further information concerning this matter, pl	ease call: TALC 2007	
(Name of Contact Person) at (ease call: 321 206 - 83 77 45 23 Area Code & Daytime Telephone Number): Florida Department of State for:	
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: STATE STA	Transaction of the second
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	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

	limited liability company		_	•
of State is:	0. M	٠ ٢ .	PUCKINEY,	LLC.
2. This limited liab	ility company was organiz よしのいりみ	ed under	the laws of:	
	ument/registration number		mited liability com	pany is:
	Do So Sp ame of Person Resigning)	· · · · · · · · · · · · · · · · · · ·	ereby resign as a _	MANAGER (Print Title)
of this limited lial resignation in wr	bility company and affirm iting.	the limite	ed liability company	JUT JUL 23 ECRETARY LLAHASS
	gning Member, Managing	Member	or Manager	PHI2: 41 OF STATE
•	\$25.00 (Required)			·
септеа сору:	\$30.00 (Optional)			