

(5)	
(Ke	equestor's Name)
(Ad	ddress)
(Ad	ldress)
(Cit	ty/State/Zip/Phone #)
\	,, - · · · · · · · · · · · · · · · · · ·
PiCK-UP	WAIT MAIL
(Bu	isiness Entity Name)
,	
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
Resign	
0	Office Use Only

300130894503

06/06/08--01014--007 **25.00

08 JUN -6 PH 1: 50

DIVISION OF CORPORATION

G. MCLEOD

JUN - 9 2008

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: FUSION ENTERPRIS	SES, LLC Liability Company)
The enclosed member, managing member or mar filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Augusto Aguilera	
(Contact Person)	
Fusion Enterprises, LLC (Firm/Company)	
8200 NW 52nd Terrace - Suit	te 104
Doral, Fl. 33166	
(City/State and Zip Code) For further information concerning this matter, p	blease call:
Augusto Aguilera at	\
, ,	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee &
V V V V V V V V V V	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	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

1. The name of the of State is: FU	limited liability company as SION ENTERPR	s it appears on the records	of the Florida Dep	oartment
2. This limited liab	ility company was organized	d under the laws of:	,	
3. The Florida doci	ument/registration number o	f this limited liability com	npany is:	
4. I, Guillerme	o Torres	, hereby resign as a	MGRM (Print Title)	
	lame of Person Resigning) bility company and affirm thiting.	ne limited liability compar	,	d of my
Signature of Res	gning Member, Managing M	Member or Manager		IF 80
_	\$25.00 (Required) \$30.00 (Optional)			44 9-NNF 80