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SECRETARY OF STATE
SECRETARY OF

COVER LETTER

	ration Section on of Corporations	
SUBJECT: _	All United Management 8 (Name of Limited	Liability Company)
The enclosed r filing.	nember, managing member or ma	anager resignation and fee(s) are submitted for
Please return a	II correspondence concerning this	s matter to:
Edgard Cu	ienca	
	(Contact Person)	
All United I	Management & Investme	ents, LLC.
	(Firm/Company)	
5595 Oran	ge Drive, Suite 201	
	(Address)	
Davie, FL	33314	·
	(City/State and Zip Code)	
For further infe	ormation concerning this matter,	please call:
Edgard Cu	encaat	786 417-2219
(Nan	ne of Contact Person)	(Area Code & Daytime Telephone Number)
	se find a check made payable to th ✓ \$25 Filing Fee	he Florida Department of State for: \$55 Filing Fee & Certified Copy
Registration So Division of Co Clifton Buildir	orporations ng e Center Circle	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

		& Investments, LLC.	he Florida Departme	nt
2. This limited liab Florida	ility company was organized	d under the laws of:		
3. The Florida doce L07000004	=	f this limited liability compan	y is:	
4. I, Jimmy Gu	tierrez Tame of Person Resigning)	, hereby resign as a Me	ember	
	bility company and affirm th	e limited liability company ha		y
Signature of Res	gning Member Managing N	Member or Manager	SECRLIANY OF S TALLAHASSEE, FL	77 658 17
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		Y OF STATE	_EU