## L07000012953

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	•				
(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)				
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	<b>`</b> .				
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)				
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PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)				
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(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(City/State/Zip/Phone #)				
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status					
(Document Number)  Certified Copies Certificates of Status	PICK-UP WAIT MAIL				
(Document Number)  Certified Copies Certificates of Status					
Certified Copies Certificates of Status	(Business Entity Name)				
Certified Copies Certificates of Status					
	(Document Number)				
	Certified Copies Certificates of Status				
Special Instructions to Filing Officer:	•				
special instructions to Filing Officer.	Considerations to Filing Officer				
	Special instructions to Filing Officer:				
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Office Use Only



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## TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

Columbus International I.I.C
SUBJECT: Columbus International LLC (Name of Limited Liability Company)
DOCUMENT NUMBER: L07000012953
DOCUMENT NUMBER: 257 0000 12000
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jorge M. Miller
(Name of Person)
Olama of Firm / Comment
(Name of Firm/Company)
5750 Collins Ave., 16F
(Address)
Miami Beach, Florida 33140
(City/State and Zip Code)
For further information concerning this matter, please call:
Jorge M. Miller at ( 305 ) 778-9425  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

INHS17(11/02)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sectio	on 608.416(2) or 608.509, Florida Statutes, t	he undersigned,	
Jorge M. Miller	. here	, hereby resigns as	
(Name of Re	egistered Agent)		
Registered Agent for Columbus	s International, LLC		
(	Name of Limited Liability Company)	· · · · · · · · · · · · · · · · · · ·	
L07000012953			
(Document Number, if known)	)		
	ffice discontinued on the 31st day after the of (Signature of Resigning Agent)		
	(Typed or Printed Name)	R-6	
	(Capacity)	PH 12: 54  EE, FLORIDA	

\$85.00 Active limited liability company
\$25.00 Administratively dissolved/voluntarily dissolved/withdrawn limited liability company

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