## 

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
Resig	
Kesig	Office Use Only



09/27/07--01028--022 \*\*25.00

COVER LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: MONVAL, LLC		
(Name of Limited Liability Company)		
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. $$		
Please return all correspondence concerning this matter to:		
SERGIO		
(Contact Person)		
BAC		
(Firm/Company)		
8347 SW 40TH ST		
(Address)		
MIAMI, FL 33155		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
SERGIO MASSA at ( 305 ) 220-3420		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		

FILLU SECRETARY (\*) DIVISION OF (\*) MIU

07 SEP 27 PM 3: 33



## 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 limited liability company as it a of State is: MONVAL, LLC	appears on the records of the Florida Department
This limited liability company was organized un     The State of Florida, Florida Statute 608 - Florida	
3. The Florida document/registration number of thi L07000026947	s limited liability company is:
4. I, MARIA HERNANDEZ  (Print Name of Person Resigning)	_, hereby resign as a MEMBER MANAGER  (Print Title)
of this limited liability company and affirm the line resignation in writing.	
Signature of Resigning Member, Managing Mem	ber or Manager