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2009 JAN 14 AH 11: 07
SECRETARY OF STATE
AND AHASSEE FLORID!

T. CLINE
JAN 15 2009
EXANTIMENT

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Saw, Swim (Name of Limited	Pools, L.L.C. Liability Company)
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Ely Marino (Contact Person)	
Law Offices of Gustas (Firm/Company)	PALLAHASSEE. FLORID
4960 Sw 72 Ave, (Address)	Suite 204
Minm, F 33155 (City/State and Zip Code)	
For further information concerning this matter,	please call:
Ely Marino at (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	
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 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

1. The name of the of State is:	limited liability company as it appears on the records of the Flores Surin Pools, CCC	rida Depa	rtment
2. This limited liab	ility company was organized under the laws of:	SECRETAL	2009 JAN 14
	ument/registration number of this limited liability company is:	RY OF S	4 AM II: 07
4. I, Clar	A Orellawa , hereby resign as a MEX	M Title)	1: 07
of this limited lia resignation in wr	bility company and affirm the limited liability company has been iting.	notified	of my
	ara		
Signature of Res	igning Member, Managing Member or Manager		
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		