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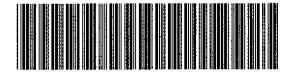
(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
, (Bu	usiness Entity Nam	ne)	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TALUCA ART	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:
DEN'S FISHMAN (Contact Person)	·
LAW OFICES OF DENIS FIS	HMAN, LLC
2999 N.E. 191st St., Ste 60.	3
AVENTURA, EC 33/80 (City/State and Zip Code)	
For further information concerning this matter, p	lease call:
(Name of Contact Person) at ((Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section 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

	imited liability company as it appears on the records of the Florida ALUCA AR7, LLC	-		
	ity company was organized under the laws of:			
•	ment/registration number of this limited liability company is:			
4. I, ALEX AC	when the second resign as a weak of Person Resigning) (Print Till Second Resigning)	M ile)	_	
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been noting.	tified of	f my	
	THE	gard Jacks of a h		
Signature of Resign	ning Member, Managing Member or Manager		2 MAY	` # <u>*</u> ;
Filing Fee:	\$25.00 (Required)	ca -	8	press.
Certified Copy:	• •	93		STATE OF THE PARTY