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C. LEWIS

SEP 2 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: De Sonto, LC (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:
Kein Fitzsimmons (Contact Person)
Mondella F. tzsmmers (Firm/Company)
102 w. whither 5t. #201
Monde (Baun F. tzs mmars (Firm/Company) 102 w. white 5t. #201 (Address) Tompa FC 33602 (City/State and Zip Code)
For further information concerning this matter, please call:
Matt Donah P (Name of Contact Person) at (873) 763 - 02-67 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee Certified Copy
STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (5/06)

2010 SEP -1 PM 12 84 SECRETARY OF STATE TALLAHASSEE, FLORIDA



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 appears of State is: Oe San to Luc	ppears on the records of the Florida Department
2. This limited liability company was organized und FURIDA	ler the laws of:
3. The Florida document/registration number of this	i limited liability company is:
4. I, SATUEZ HOLES. (Print Name of Person Resigning)	, hereby resign as a MANAGING Merrose (Print Title)
of this limited liability company and affirm the lin resignation in writing.	
Signature of Resigning Member, Managing Mem	ber or Manager

Filing Fee:

\$25.00 (Required) \$30.00 (Optional)

Certified Copy: