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(Requestor's Name)					
(Address)					
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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
Certified Copies	_ Certificates	s of Status			
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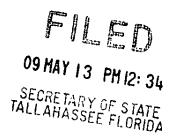
OS MAY 13 PH 12: 34
SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO:	P: Registration Section Division of Corporations		
	·	Maybatin a LLO	
SUBJ	ECT: Puerto Azul Sales &	Limited Liability Company)	
The er filing.	nclosed member, managing member	er or manager resignation and fee(s) are submitted for	
Please	return all correspondence concern	ning this matter to:	
Jasc	on Desmond		
	(Contact Person)		
	(Firm/Company)		
<u>64</u> 51	N Federal Highway Ste	1200	
	(Address)		
Fort	Lauderdale, Fl. 33308	·	
	(City/State and Zip Code)		
For fu	rther information concerning this r	natter, please call:	
Jaso	n Desmond	at (954) 491-8501	
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclos	sed please find a check made payal \$25 Filing Fee	ole to the Florida Department of State for: \$55 Filing Fee & Certified Copy	
Registr Division Clifton 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations a Building Executive Center Circle assee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as erto Azul Sales & Mar		f the Florida Department
2. This limited liab Florida	ility company was organized	under the laws of:	
7	ument/registration number of	this limited liability compa	any is:
4. I, Derek Radzikowski (Print Name of Person Resigning)		, hereby resign as a	IGRM
•	bility company and affirm the	limited liability company	(Print Title) has been notified of my
Signature of Resi	gning Member, Managing M	ember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		