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(Requestor's Name)			
(Address)			
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•			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Pusiness Entity Name)			
· (Business Entity Name)			
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COVER LETTER

TO: Registration Section			
Division of Corporations			
SUBJECT: SMART BUY CAR SALES	SLLC		
(Name of Limited Liability Company)			
The enclosed member, managing member or ma	nager regionation and fac(s) are submitted for		
filing.	mager resignation and rec(s) are submitted for		
-	•		
Please return all correspondence concerning this	matter to:		
Joseph Villate			
(Contact Person)			
,			
Villate CPA			
(Firm/Company)			
454 NW 22 Ave, STE 209			
(Address)			
Miami, FL 33125			
(City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
	005		
	305 541-4714		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for:			
\$25 Filing Fee	\$55 Filing Fee &		
	Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301			

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 i	t appears on the records of the Florida Department S LLC
2. This limited liab	pility company was organized	under the laws of:
3. The Florida doc 	=	his limited liability company is:
4. I, Francisco		, hereby resign as a MGRM
of this limited lia resignation in wi	bility company and affirm the iting.	limited liability company has been notified of my
Signature of Res	igning Member, Managing Me	mber or Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	