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2000 DEC -8 PH 3: 23
SECRETARY OF STATE
TALL ANASSEE, FLORIDA

C. LEWIS
DEC 0 9 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: SYNERGY (Name of	600P	INVESTMENTS, LL
The enclosed member, managing membe filing.	r or manager resi	gnation and fee(s) are submitted for
Please return all correspondence concern	ing this matter to	:
DORA JIMENE (Contact Person)	3Z	_
(Contact Person)		
(Firm/Company)		
13510 NW 107	AVE	
HALEAH GARDENS (City/State and Zip Code)	TL 3301	8
For further information concerning this m	natter, please call	:
Dolla JIMENEZ (Name of Contact Person)	at (30(8 20 - 1001 e & Daytime Telephone Number)
Enclosed please find a check made payab \$25 Filing Fee	ole to the Florida	,
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

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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

				of the Florida Departmen	
of State is:	SYNER64	6 ROUP	INVESTME	NIS, LLC	
	,			,	
2. This limited liab	ility company was o	organized unde	er the laws of:		
FLOR	UDA				
3. The Florida docu	ment/registration n	umber of this	limited liability comp	pany is:	
	0009562				
	1 - 1				
4. I, <i>JUA</i> ~	J C. NOV	<u> </u>	hereby resign as a	MGR (Print Title)	
(Print N	ame of Person Resignin	ng)	_	(Print Title)	
		affirm the limi	ted liability company	has been notified of my	У
resignation in wri					
4	Stall				
&	45				
Signature of Resi	ghing Member, Ma	naging Membe	er or Manager		
•	,				
Filing Fee:	\$25.00 (Require	d)			
Certified Copy:		,			