108000003390

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
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08 JUN -4 PN 12: 06

SECRETARY OF STATE
ALLIAMASSEE FLORIDA

T. HAMPTON

JUN - 5 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor						
SUBJECT:	CARMEL	BUSINESS LL(_			
	(Name of Lim	ited Liability Company)				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	FABIO RONDEROS					
		(Name of Person)				
(Firm/Company)						
	2893	Exacutic Park T	Drive Ste 118			
		On FL 33331 (City/State and Zip Code)				
For further information co	oncerning this matter, please c	all:				
Fa515	Ponolers	at (GTU) 3841 (Area Code & Daytime T	OI3.			
((1.5.5.cm)	(The Code & Bayanie 1	orephone Number /			
Enclosed is a check for th	e following amount:					
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
		_				

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



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 of State is:	limited liability company as Carmel Busines	it appears on the records of	of the Florida Department
	ility company was organized		
3. The Florida doci	ument/registration number of	this limited liability comp	pany is:
4.I. FABI	TO PONDEROS Jame of Person Resigning)	, hereby resign as a	MANAGER
(Print \lambda	lame of Person Resigning)	,	(Print Title)
resignation in wr	bility company and affirm the iting. 1 an a gev - Igning Member, Managing M		y has been notified of my
	\$25.00 (Required) \$30.00 (Optional)		FILE 08 JUN -4 SECRETARY I TALLAHASSEE
			0F SI

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