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SECRETARY OF STATE.

Chass.

COVER LETTER

TO: Registration Section Division of Corporations	
	Financia/ LLC d Liability Company)
The enclosed member, managing member or mailing.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
Naida I. Val	/ /.
[Contact Person] Innovating Financia (Firm/Company)	al LLC
1515 Michigan Ave	#15
Hissinmee F13	34744
(City/State and Zip Code)	
Naida Valentia	please call: at (407) 690 – 8592
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$\\$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tellohagana, Florida 33314
2001 DACCULIVE CELLET CHEEK	. Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



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SECRETARY UN 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 of State is:	limited liability company as in Innovating A	t appears on the reco	ords of the Florida Department LLC.
1	lity company was organized u	under the laws of:	
3. The Florida docu	ment/registration number of t	his limited liability	company is:
4. 1, Luis (Print No.	OSTALES ame of Person Resigning)	, nereby resign a	sa Managing Member
of this limited liab	• •	limited liability con	npany has been notified of my
Mais	la de Valent	ten	
Signature of Resig	gning Member, Managing Me	ember or Manager	
Filing Fee:	\$25.00 (Required) \$30.00 (Ontional)		