LMOODS9885

(Requesto	or's Name)	
(Address)		
(Address)		
(City/State	e/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business	Entity Name)	
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COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: Chrome Fund, LLC	
	Limited Liability Company)
The enclosed member, managing member filing.	or manager resignation and fee(s) are submitted for
Please return all correspondence concerni	ng this matter to:
Susana Jimenez	
(Contact Person)	
La Primera Interanational Corp	oration
(Firm/Company)	
888 Brickell Avenue, PH	
(Address)	
Miami, Florida 33131	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
Joseph Hassan	at (305) 3713001
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payabl	
✓ \$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	



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 it apports of the company as it appears of th	opears on the records of the Florida Department
2. This limited liab Florida	ility company was organized unde	ler the laws of:
3. The Florida doce L08000088	ument/registration number of this 3885	limited liability company is:
4. I, Joseph Hass	an/American Capital Alliance	, hereby resign as a Manager (Print Title)
	bility company and affirm the lim	(Print Title) nited liability company has been notified of my
Signature of Resi	gning Member, Managing Member	AMERICAN CAPITAL Alliance. ber or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	12 APR -6 P