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D. BRUCE

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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Aldrea Fund, LLC	Limited Liability Company)		
(Ivanie of	Ennice Elability Company)		
The enclosed member, managing member filing.	r or manager resignation and fee(s) are submitted for		
Please return all correspondence concerni	ing this matter to:		
Susana Jimenez			
(Contact Person)			
La Primera Interanational Corp	poration		
(Firm/Company)	Α. Ε.		
888 Brickell Avenue, PH	APR - TAHAS		
(Address)	SE CO 1		
Miami, Florida 33131	OF STATE		
(City/State and Zip Code)	NATE TO SELECT THE SEL		
For further information concerning this m	natter, please call:		
Joseph Hassan	_{at (} 305 ₎ 3713001		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payab \$\sumseteq \frac{1}{25}\$ Filing Fee	le to the Florida Department of State for: \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS: Pagistration Section	MAILING ADDRESS: Registration Section		
Registration Section Division of Corporations	Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		

Tallahassee, Florida 32301

CR2E079 (5/06)

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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 appears on the records of the Florea Fund, LLC	orida De _l	partm	ent _·
	ility company was organized under the laws of:	EERETARY OF S	2 APR -6 ANI	
3. The Florida docu L08000089	ment/registration number of this limited liability company is:	ORIDA		.
4. I, Joseph Hass	an/American Capital Alliance, hereby resign as a Manag	er		
	oility company and affirm the limited liability company has bee	ŕ	d of n	ny
Signature of Resi	gning Member, Managing Member or Manager	HIANC	e-	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			