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T. CLINE
JUL 1 7 2012
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: American Top Team Davie, LL	
(Name of Limited Liability	y Company)
The enclosed member, managing member or manager filing.	resignation and fee(s) are submitted for
Please return all correspondence concerning this matter	r to:
Rodrigo Ramos	
(Contact Person)	
American Top Team Davie, LLC	
(Firm/Company)	Die B
5929 S. University Drive	MIZ JUL 16 PM 1: 58 SECRETARY OF STATE ALLAHASSEE, FLORID
(Address)	HASA I
Davie, FL 33328	
(City/State and Zip Code)	E S
For further information concerning this matter, please	call:
Rodrigo Ramos at (95	Code & Daytime Telephone Number)
(Name of Contact Person) (Area	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo	orida Department of State for:
\$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	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	imited liability company as prican Top Team Dav	it appears on the records of the, LLC	he Florida Department
2. This limited liabi	lity company was organized	under the laws of:	ı
3. The Florida docu L08000092	_	f this limited liability compan	y is:
_{4. I.} John Wai		, hereby resign as a Ma	anager
	ame of Person Resigning)	, nereby resign as a	(Print Title)
resignation in wri	ting.	ne limited liability company h	as been notified of my
Signature of Kesi	gning Member, Managing N	Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2012 JUL 16 PH 1: SECRETARY OF STATEMENT ALLAHASSEE, FLORI

CR2E079 (5/06)