## L08000095987

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instruction to Filling of ther		
NOV - 2 2009		
EXAMINER		
NOV - 2 2009 <b>EXAMINER</b> 509 A000345		

Office Use Only



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2009 OCT 30 PH 4: 30

SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: HQT Shop LLC	
(Name of Limited I	Liability Company)
The enclosed member, managing member or mar filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Nayarit Briceno	
(Contact Person)	<del></del>
BW&T Business Advisers, Inc	200 7AL
(Firm/Company)	ORE CAH,
9050 Pines Boulevard Suite 450	30 (SSE
(Address)	n p
Pembroke Pines, FL 33024	000 OCT 30 PM 4: 30 SECRE FRY OF STATE ALLAHASSEE, FLORIDA
(City/State and Zip Code)	0
For further information concerning this matter, pl	lease call:
Nayarit Briceno at (	954 , 443-1594
	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$\sqrt{25}\$ Filing Fee	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 Tallahassee Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

The name of the limited liability company as it appears on the records of the Florida of State is: HQT Shop, LLC	Departn AH	200600
2. This limited liability company was organized under the laws of:  Florida	KSSEE, FLORIDA	30 PM 4: 30
3. The Florida document/registration number of this limited liability company is:  L08000095987		
4. I, Arturo Mayoral on behalf of Paguapi London Company hereby resign as a Manager  (Print Name of Person Resigning) (Print Ti	tle)	
of this limited liability company and affirm the limited liability company has been no resignation in writing.	tified of	my
Signature of Resigning Member, Managing Member or Manager		
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)		
CR2E079 (5/06)		