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G. MCLEOD

MAY 13 2009

EXAMINER



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SECRETARY OF A ATT

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Mancuso Group LLC	
(Name of Limite	d Liability Company)
The enclosed member, managing member or n filing.	nanager resignation and fee(s) are submitted fo
Please return all correspondence concerning th	is matter to:
Massimo Mancuso	
(Contact Person)	
Mancuso Group LLC	
(Firm/Company)	
5825 Collins Ave-Ste 3F	
(Address)	
Miami Beach, Fl. 33140	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Massimo Mancuso	11 (305) 710-7575
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t \$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 Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



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 limited liability company as it ap of State is: Mancuso Group LLC	pears on the records	s of the Florida Department
2. This limited liability company was organized under Florida	er the laws of:	
3. The Florida document/registration number of this L08000108798	limited liability con	npany is:
4. I, Emanuele Mancuso	hereby resign as a	Managing Member
(Print Name of Person Resigning) of this limited liability company and affirm the limit resignation in writing.		(Print Title)
Signature of Resigning Member, Managing Member	er or Manager	

Filing Fee:

\$25.00 (Required)

Certified Copy:

\$30.00 (Optional)

CR2E079 (5/06)