109000010127

| , |
|---|
| (Requestor's Name) |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| ' PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |

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A. LUNT

SEP -9 2009

EXAMINER

Office Use Only



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SECRETARY OF STATE

2009 SEP -8 PM 4: 07

COVER LETTER

| Division of Corporations | • |
|--|---|
| SUBJECT: Independent Global So | <u> </u> |
| The enclosed member, managing member or man filing. | ager resignation and fee(s) are submitted for |
| Please return all correspondence concerning this | matter to: |
| Pablo F. Gomez | 7AS 20 |
| (Contact Person) | 2009 SEP -8 PH 4: 07 SECRETARY OF STATE ALLAHASSEE, FLORID |
| (Firm/Company) | EP -8 PM 4: 07 ETARY OF STATE HASSEE, FLORID |
| 2600 SW 3 Avenue Suite 850 | 01-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- |
| (Address) | NIE RIDA |
| Miami, FL 33129 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, pl | ease call: |
| Pablo F Gomez at ((Name of Contact Person) | 305 856-1024 r |
| Enclosed please find a check made payable to the \$25 Filing Fee | • |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassea, 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 lin of State is: Inde | nited liability company as it ap pendent Global Sol | opears on the records utions, LLC | of the Fl | orida D | epartm | ent |
|---|--|--------------------------------------|-----------|-------------|---------------|-----|
| 2. This limited liabilit Florida | y company was organized und | der the laws of: | | SECRETARY O | 2009 SEP -8 1 | 7 |
| 3. The Florida docum | ent/registration number of this | s limited liability con | npany is: | FLORIDA | PH 4: 07 | |
| 4. [, Leonardo | F. Brito e of Person Resigning) | _, hereby resign as a | MGR | M / V | <u>/P</u> | _ |
| of this limited liabil resignation in writing | ity company and affirm the lin | nited liability compa | ny has be | en notif | ied of i | my |
| Standing of Resign | ning Member, Managing Meml | her or Manager | | | | |
| Signature of Resign | ing Weinber, Wanaging Wein | ber of Manager | | | | |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | | | | |