L09000018065

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
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MAY - 6 2013

T. PAMPTON

COVER LETTER

TO: Registration Section **Division of Corporations**

MONEY MANAGEMENT LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Pablo Llavona

(Contact Person)

MONEY MANAGEMENT LLC

(Firm/Company)

612 Rosselli Blvd

(Address)

Champions Gate, FL 33896

(City/State and Zip Code)

For further information concerning this matter, please call:

Pablo Llavona

__at (<u>407</u>) <u>694 - 7191</u> (Area Code & Daytime Telephone Number)

(Name of Contact Person)

Enclosed please find a check made payable to the Florida Department of State for:

□ \$25 Filing Fee

■ \$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

of State is: MONEY MANAGEMENT I	LLC
2. This limited liability company was organized FLORIDA	i under the laws of:
3. The Florida document/registration number of L09000018065	f this limited liability company is:
_{4. I.} Paul E . LaVancha	, hereby resign as a MGRM
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the resignation in writing. Signature of Resigning Member, Managing Member,	Tember or Manager
	7. PV

\$25.00 (Required)

\$30.00 (Optional)

SECRETARY OF OR ATTOMS
DIVISION OF CORPORATIONS
13 MAY -3 AM 11: 31

Filing Fee:

Certified Copy: