

LD90000019938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

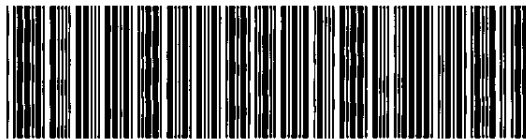
Special Instructions to Filing Officer:

**L. SELLERS**

**MAY 14 2009**

**EXAMINER**

Office Use Only



500155814945

05/13/09--01014--015 \*\*25.00

FILED  
09 MAY 13 AM 8:27  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ACH TRADING, 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:

SALVADOR CARRILLO

(Contact Person)

(Firm/Company)

16431 BLATT BLVD APT 201

(Address)

WESTON FL 33326

(City/State and Zip Code)

For further information concerning this matter, please call:

SALVADOR CARRILLO

(Name of Contact Person)

at ( 954 ) 736-8719

(Area Code & Daytime Telephone Number)

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



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 appears on the records of the Florida Department of State is: ACH TRADING, LLC
2. This limited liability company was organized under the laws of:  
FLORIDA
3. The Florida document/registration number of this limited liability company is:  
L09000019938
4. I, SALVADOR CARRILLO, hereby resign as a MGRM  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

**FILED**  
**09 MAY 13 AM 8:17**  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA