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SECHETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JUN - 8 2010

EXAMINER

COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	SUN INVESTMENT SERVIC (Name of Limited Liabil		 .
The analysis	,		nitted for
filing.	d member, managing member or manager	resignation and lee(s) are sub-	intied for
Please return	n all correspondence concerning this matt	er to:	
Vince Ve	ellardita		
	(Contact Person)		
Valcom,	Inc.		
	(Firm/Company)		7A S
2113A G	ulf Blvd.		ZBIR JUN -7 AM H: 08 SECRETARY OF STATE TALLAHASSEE, FLORID
	(Address)		ARY SSE
Indian Ro	ocks Beach, FL 33785		E S S
 -	(City/State and Zip Code)		927 O
For further i	nformation concerning this matter, please	e call:	2 60
Vince Ve	at \	27 953-9778	
()	Name of Contact Person) (Area	Code & Daytime Telephone Num	nber)
Enclosed ple	ease find a check made payable to the Flo	orida Department of State for: \$55 Filing Fee & Certified Copy	
	OURIER ADDRESS:	MAILING ADDRESS:	
Registration		Registration Section	
	Corporations	Division of Corporations	5
Clifton Buil		P.O. Box 6327	1.4
	tive Center Circle , Florida 32301	Tallahassee, Florida 323	14

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as i		of the Flo	rida De	partme	ent
2. This limited liabi	lity company was organized	under the laws of:		SECRETA!	2010 JUN - T	
3. The Florida docu 	ment/registration number of to 1992 LARDITA-VALCOM, INCome of Person Resigning)	this limited liability com 	npany is:	RY OF STATE SEE, FLORIE		
4. I, VINCE VEL	LARDITA-VALCOM, IN	C. , hereby resign as a	MANA	GING	MÊN	IBER
of this limited light resignation in wri	oility company and affirm the	limited liability compar				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					