L09000031566

(Re	questor's Name)	
C	,	
(Ad	ldress)	. .
(Ad	ldress)	
· (Ci)	ty/State/Zip/Phone	
	y/State/Zip/P110He	= # <i>)</i>
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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B. BOSTICK OCT - 8 2012 EXAMÎNER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CRISTINE, LLC	
(Name of Limited L	.iability Company)
The enclosed member, managing member or mar filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
CAROL CRISTINA FARINA	
(Contact Person)	
CRISTINE, LLC	
(Firm/Company)	20 E
3201 NE 183 STREET, APT. 1601	12 OCT -5 PM 12: 25
(Address)	
AVENTURA, FL. 33160	1 2 1 2 1 1 2 1 1 1 1 1 1 1 1 1 1
(City/State and Zip Code)	
For further information concerning this matter, p	lease call:
CAROL CRISTINA FARINA at (305) 915-3259
#: (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$\sqrt{25}\$ Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	1 allallandoo, 1 lollaa 2201 1
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 of State is: CRISTINE, LLC	it appears on the records of the Florida Department
2. This limited liability company was organized FLORIDA	under the laws of:
3. The Florida document/registration number of L09000031566	this limited liability company is:
4. I, JUAN A FIGUEROA (Print Name of Person Resigning)	, hereby resign as a MGRM (Print Title)
\wedge	e limited liability company has been notified of my
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	12 0CT -5 PM I2: 2