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D. BRUCE

JUL 07 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: VSerroro LLC (Name of Limited Liability Co	ompany)		
The enclosed member, managing member or manager resulting.	ignation and fee(s) are submitted for		
Please return all correspondence concerning this matter to	o:		
Todd Mc Cov (Contact Person)	_		
VSerrano LLC (Firm/Company)	<u>. </u>		
13347 Paloma Dr	A.c.	10	
Gardo Fl 32837 (City/State and Zip Code)	- Passara Natara	JUL -6	MCS.
For further information concerning this matter, please cal	l:	PX	1.
Vanessa Serrano at (167) (Name of Contact Person) (Area Coo	de & Daytime Telephone Number	PH 4: 22	(_
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: \$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

	imited liability company as it appears on the record	ds of the Florida Department
2. This limited liabil	ity company was organized under the laws of:	
	ment/registration number of this limited liability co	ompany is:
	me of Person Resigning), hereby resign as	a <u>URT</u> (Print Title)
of this limited liab resignation in writ	ility company and affirm the limited liability comp	any has been notified of my
Signature of Resig	ming Member, Managing Member or Manager	10 JUL
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	TO PH 4: 22 ARY OF STATE OSSEE FLORIDA

CR2E079 (5/06)