Division of Corporations

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Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : 120000000083 Phone : (305)932-6262 Fax Number : (305)933-9393

ilde*Enter the email address for this business entity to be used for future \cong annual report mailings. Enter only one email address please. **

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ANALUFE, L.L.C.

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appear	rs on the records of the Florida Department
of State is: ANALUFE, L.L.C.	-
2. The Florida document/registration number assigned to L09000083644	this limited liability company is:
3. The date this member/manager withdrew/resigned or	will withdraw/resign is:
4. I, Eduardo Odiemo he (Print Name of Person Resigning)	reby withdraw/resign as a
Member	
(Print Title)	21 21 21 21 21 21 21 21 21 21 21 21 21 2
of this limited liability company and affirm the limited resignation in writing.	liability company has been notified of my 77 22 □ □ ■ □
Signature of Dissociating Member or Resigning Man	nager D D