L09000084544

(Re	questor's Name)	
(Ad	dress)	
(ΔΔ)	dress)	
(//u	uiess)	
. (Cit	y/State/Zip/Phone	∋ #)
. PICK-UP	WAIT	MAIL
(D.,	siness Entity Nan)
(Du)	Siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	-	
Special Instructions to	Filing Officer:	
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Office Use Only



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10 FEB 23 AM II: 54

COVER LETTER

CR2E079 (5/06)

TO:	Registration Section		
	Division of Corporations		
SUBJ	,		
	(Name of Lim	ited Liability Cor	npany)
The enfiling.	nclosed member, managing member or	manager resig	gnation and fee(s) are submitted for
Please	return all correspondence concerning	this matter to:	
Laur	ra Montejo		
	(Contact Person)		_
Jorg	e Gaviria, P.A.		_
	(Firm/Company)		
9769	9 S. Dixie Highway, Suite 10	1	_
	(Address)		•
Miar	ni, Fl 33156		-
	(City/State and Zip Code)		
For fu	rther information concerning this matt	er, please call:	
Laur	a	at (305	666-8844
•	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclos	sed please find a check made payable t	o the Florida I	Department of State for:
	\$25 Filing Fee		\$55 Filing Fee &
			Certified Copy
STRE	ET/COURIER ADDRESS:		MAILING ADDRESS:
_	tration Section		Registration Section
	on of Corporations		Division of Corporations
	n Building		P.O. Box 6327
	Executive Center Circle		Tallahassee, Florida 32314
Tallah	assee, Florida 32301		



FILED 10 FEB 23 AM II: 54

SECRETARY OF STATE FALLAHASSEE, FLORIDA

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 Hospitality Group, Ll	it appears on the records of t _C	he Florida Department
2. This limited liab	ility company was organized	l under the laws of:	
3. The Florida doct L0900084	-	f this limited liability compan	y is:
4. I, Alexis Mog	gollon	, hereby resign as a Mo	gr
of this limited lial resignation in we	pility company and affirm the	e limited liability company h	
_	gning Member, Managing M \$25.00 (Required) \$30.00 (Optional)	fember or Manager	