L0900112457

(Re	questor's Name))		-	
(Address)				-	
(Address)				-	,
(Cit	ty/State/Zip/Phon	ne #)	· · ·	-	
PICK-UP	☐ WAIT		MAIL		
(Ви	siness Entity Na	me)		-	
(Do	ocument Number)		-	
Certified Copies	_ Certificate	es of Status	s	-	
Special Instructions to	Filing Officer:]	
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B. KOHR

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JUN 1 3 2012

EXAMINER

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: GOLDEN LIGHT BUSIN	
(Name of Lir	mited Liability Company)
The enclosed member, managing member of filing.	or manager resignation and fee(s) are submitted for
Please return all correspondence concerning	g this matter to:
Garry Nelson, Esq.	
(Contact Person)	
Garry Nelson Attorney at Law	
(Firm/Company)	
1401 Brickell Avenue, Suite 300	
(Address)	
Miami FL 33131	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
Garry Nelson	_at (_305) 374-2002
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

1. The name of the limited liability company as it apports of State is: GOLDEN LIGHT BUSINESS,	
2. This limited liability company was organized under Florida	er the laws of:
3. The Florida document/registration number of this L09000112457	limited liability company is:
4. I, Roberta Dias da Silva	hereby resign as a Managing Member
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the limitesignation in writing.	ted liability company has been notified of my
- Roberta Cristina Dias da silv	Ο
Signature of Resigning Member, Managing Member	er or Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)