109000123289

(Requestor's Name)			
(Address)	_		
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)	_		
(Document Number)			
Certified Copies Certificates of Status	_		
Special Instructions to Filing Officer:	٦		
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Office Use Only



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TO MAR 16 AM II: 07

D. BRUCE

MAR 17 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Auto Lease Group,		
(Name o	of Limited Liability Company)	
The enclosed member, managing member filing.	ber or manager resignation and fee(s) are submitted for	r
Please return all correspondence concer	rning this matter to:	
Francesco La Lumia		
(Contact Person)	rand	
	المنافقة ال المنافقة المنافقة ا	=
Auto Lease Group, LLC.		<u> </u>
(Firm/Company)		5
	SS TO	
1500 W. Copans Rd. A-9	© 17	
(Address)	AHASSEE, FLORIDA	
		- August
Pompano Beach, FL 33064	0A 0A	
(City/State and Zip Code)		
(,		
For further information concerning this	matter, please call:	
Francesco La Lumia	at (305) 450-6434	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
	rable to the Florida Department of State for:	
\$25 Filing Fee	\$55 Filing Fee &	
	Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

The name of the limited liability company as it a of State is. Auto Lease Group, LLC.	ppears on the records of the	e Florida Department
of State is:		
2. This limited liability company was organized un	der the laws of:	
Florida		
3. The Florida document/registration number of the L09000123289	s limited liability company	is:
4 L Riccardo Raffaeli	_ hereby resign as a Mei	mber
(Print Name of Person Resigning) of this limited liability company and affirm the li	mited liability company ha	(Print Title) s been notified of my
resignation in writing.		10 MAR
Signature of Resigning Member, Managing Men	iber or Manager	SSE
Filing Fee: \$25.00 (Required)		AHH:
Certified Copy: \$30.00 (Optional)		9 MAG