## L100000 0008

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#### **COVER LETTER**

Division of Corporations		
SUBJECT: LOS LAGOS ENTERPRISE LLC		
(Name of Limited Liability Con	прапу)	
The enclosed member, resignation or dissociation and fee(s	) are submitted for filing.	
Please return all correspondence concerning this matter to:		
PEDRO A RIVERA		
(Contact Person)		
RIVERA & ASSOCIATES		
(Firm/Company)		
2752 MICHIGAN AVE C-4		
(Address)	-	
KISSIMMEE, FL 34744		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
PEDRO A RIVERA 407	350-2556	
PEDRO A RIVERA  at ()  (Name of Contact Person)  (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for:  \$\Bigsim \frac{1}{2} \\$55 \text{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 (2/14)



#### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

# Y-7 PH 12: 11

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	e limited liability company as it	appears on the records of the Florida Department
of State is: LOS	S LAGOS ENTERPRISE LLC	<u> </u>
2. The Florida doc	ument/registration number assi	gned to this limited liability company is:
L1000001000	08	
3. The date this me	ember/manager withdrew/resign	ned or will withdraw/resign is:
4. I, JESUS ALBERTO ALAS MARTINEZ  (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print)	Name of Person Resigning)	
MANAGER		
	(Print Title)	
resignation in w	riving.	limited liability company has been notified of my
Signature of D	Dissociating Member or Resigni	ng Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	` <b>1</b>	