

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Cit	y/State/Zip/Phone	#)
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(Do	cument Number)	<u> </u>
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G. MCLEOD

 $M\Delta R = 8 2010$

EXAMINER



800171212628

03/05/10--01006--803 **25.80

DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: L& CPUS LLL (Name of Limited Liability	v Company)
The enclosed member, managing member or manager of filing.	resignation and fee(s) are submitted for
Please return all correspondence concerning this matter	r to:
ESTEBAN ALOIA	
(Contact Person)	
Lectrus uc.	
(Firm/Company)	
2340 Ne 1925	
MIA11 FC 33180	
(City/State and Zip Code) For further information concerning this matter, please of	eall:
Esteben Aloid 31,950	4,3945928
(Name of Contact Person) (Area C	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flori	da Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: 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 of State is:	limited liability company a とCTVS LUC .	s it appears on the records of	the Florida Department
2. This limited liab	ility company was organize	d under the laws of:	
3. The Florida docu	nment/registration number of	of this limited liability compa	ny is:
4. I, <u>ESTEBA</u> I	J AWH MAWY ame of Person Resigning)	, hereby resign as a	Megsa JAJA6W
of this limited liab resignation in wri	pility company and affirm the ting.	ne limited liability company h	•
Signature of Resi	gning Member, Managing I	Member or Manager	3
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		SECRETARY OF CORPOR