410000026007

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

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T. HAMPTON

DEC 1 4 2010

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: ANTARES 4	USTRAL LLC
(Nar	ne of Limited Liability Company)
The enclosed member, managing me filing.	ember or manager resignation and fee(s) are submitted for
Please return all correspondence con	cerning this matter to:
OCTENIO A. SMC	averzo
(Contact Person)	
ANTARES OVSTRAN	uc
(Firm/Company)	
SUTURES ONSTRAN (Firm/Company)  8478 NW 72 1/2  (Address)	Schee
(Address)	
MISMI, FL 3316 (City/State and Zip Co	66 <u> </u>
(City/State and Zip Co	ode)
For further information concerning t	his matter, please call:
LEONARDO V. SALCAVE	20 at (305) 715 - 9031 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made r	payable to the Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
<b>₩</b>	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 32301	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 appears on the records of the Florida Department
of State is: ANTARES AUSTRAL LLC
2. This limited liability company was organized under the laws of:
FLORIDA.
3. The Florida document/registration number of this limited liability company is:
L10000026007
4. I, OCTAVIO ARNALDO SOLGUERO hereby resign as a MANAGING MEMBER
(Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Tool Branch III Willying
12191
Signature of Resigning Member, Managing Member or Manager
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

CR2E079 (5/06)

SECKETARY OF STATE

NOTE: THE CORPOR STATE

NOTE: THE