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SECRETARY OF STATE

S. PRATHER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	Brightcomms America, LLC				
(Name of Limited Liability Company)					
The en	nclosed member, resignation or dissociation	on and fee(s)	are submitted for filing.		
Please	return all correspondence concerning this	s matter to:			
JOSB	EIDA QUIJADA				
	(Contact Person)				
BRIG	HTCOMMS AMERICA, LLC				
	(Firm/Company)				
2840	SHIPPING AVE				
	(Address)				
coco	ONUT GROVE, FL 33133				
	(City/State and Zip Code)				
For fu	rther information concerning this matter.	please call:			
JOSB	BEIDA QUIJADA	786	863-7250		
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: \$\Pi\$ \$25 Filing Fee & Certified Copy					
Regist Division Clifton 2661 E	ration Section on of Corporations n Building Executive Center Circle assee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

CR2E079 (2/14)







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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company a	as it appears on the records of the Florida Department
of State is:	htcomms America, LLC	
2. The Florida doc	ument/registration number a	assigned to this limited liability company is:
L1000003293	5	·
3. The date this me	ember/manager withdrew/re	esigned or will withdraw/resign is:
4. I, JOSE G MEDINA		, hereby withdraw/resign as a
(Print)	Same of Person Resigning)	, hereby withdraw/resign as a
MANAGING	MEMBER	
	(Print Title)	
of this limited lia resignation in wr		the limited liability company has been notified of my
Signature of D	issociating Member or Resi	gning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	