

05-10-10

03:06PM

FROM: Akerman Senterfitt

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Division of Corporations

L10000041079

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : AKERMAN SENTERFITT (MIAMI)
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: pedro.freyre@akerman.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CASCORP LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$60.00

10 May 10 AM 7:55

SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

MAY 11 2010

EXAMINER

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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: CASCORP 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:
L10000041079

4. I, PEDRO A. FREYRE, hereby resign as a MEMBER/SOLE INCORPORATOR
(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.

A handwritten signature in dark ink, appearing to read "Pedro A. Freyre", is written over a horizontal line.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

CR2E079 (5/06)

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