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

Office Use Only

G. MCLEOD

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## **COVER LETTER**

Division of Corporations	
SUBJECT: DiGal LLC	
(Name of Limit	ed Liability Company)
The enclosed member, managing member or r filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning the	nis matter to:
Cesar Diaz	
(Contact Person)	
Motors Tech LLC	
(Firm/Company)	
2030 SW 71st Terrace Bay C5	
(Address)	
Davie, FL 33317	
(City/State and Zip Code)	The state of the s
For further information concerning this matter	, please call:
Johanna Diaz	<sub>at (</sub> 813 <sub>)</sub> 817-3272
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	the Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	<b>MAILING ADDRESS:</b>
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

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: DiG		it appears on the records of the	e Florida Department
2. This limited liab Florida	ility company was organized	under the laws of:	
3. The Florida docu L10000045	_	this limited liability company	is:
4. I, Ciro Galvis (Print Name of Person Resigning)		, hereby resign as a Mar	naging Member (Print Title)
of this limited lial resignation in wri		limited liability company has	, ,
fee	Chil		
Signature of Resi	gning Member, Managing M	ember or Manager	
	\$25.00 (Required) \$30.00 (Optional)	•	12 FEB

CR2E079 (5/06)