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CEURETARY OF STATE
ALL AHASSEE, FLORIDA

D. BRUCE
DEC 2.0 2011
EXAMINER

SUBJECT: MISAEL AUTO SALE	LLC
	nited Liability Company)
The enclosed member, managing member of filing.	r manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
SARA L GARCIA	
(Contact Person)	
VISAEL AUTO SALE LLC	
(Firm/Company)	
1337 LONGOAK DR SOUTH	
(Address)	
_AKELAND, FL 33811	
(City/State and Zip Code)	
or further information concerning this matt	ter, please call:
3ARA L GARCIA	at 813 410-0031
(Name of Contact Person)	at (<u>813</u>) <u>410-0031</u> (Area Code & Daytime Telephone Number)
inclosed please find a check made payable	
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
TREET/COURIER ADDRESS:	MAILING ADDRESS:
Legistration Section	Registration Section
Division of Corporations	Division of Corporations
lifton Building	P.O. Box 6327

Tallahassee, Florida 32314

IN DEC 19 PM 12: 04

R2E079 (5/06)

661 Executive Center Circle

'allahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

. The name of the of State is: MIS	limited liability company as SAEL AUTO SALE LI	s it appears on the records of the Florida Departi	ment 		
	ility company was organized FLORIDA	d under the laws of:			
The Florida doc		of this limited liability company is:			
SARA L G	ARCIA	, hereby resign as a MEMBER MAN	AGER		
(Print N	lame of Person Resigning)	(Print Title)			
of this limited lia resignation in wr		he limited liability company has been notified of	fmy Aff	- ===	
Signature of Res	Igning Member, Managing N	Member or Manager	URE MARY LAHASSE	DEC 19	
'iling Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		OF STA	PH 12: (7

R2E079 (5/06)