## L10000076069

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ac                     | ldress)            |             |
| (Ad                     | ldress)            |             |
| (Ci                     | ty/State/Zip/Phono | ∋ #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | ısiness Entity Nar | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
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SECRETARY OF STATI

J. BRYAN

APR 28 2011

**EXAMINER** 

## **COVER LETTER**

| TO: Registration Section Division of Corporations                                      |  |
|--|--|
| SUBJECT: HANNA REUSABLE IN   | STERNATIONAL LLC.  |
| The enclosed member, managing member or milling.                                       | anager resignation and fee(s) are submitted for                              |
| Please return all correspondence concerning this                                       | s matter to:   |
| NOE F RODRIGUEZ (Contact Person)   |  |
| N/A  | APR 23   |
| (Firm/Company) 6820 INDIAN CREEK DR Apt. 40 (Address)                                  | APR 27 PM 1: 00  APR 27 PM 1: 00  CRETARY OF STATE  CHAHASSEE. FLORIO        |
| MIAMI BEACH R. 33141 (City/State and Zip Code)   |  |
| For further information concerning this matter,  | please call:   |
| NOE F. RUDRIGUEZ at (Name of Contact Person)   | (305) 786-663 4035   |
|  |  |
| Enclosed please find a check made payable to t \$25 Filing Fee                         | he Florida Department of State for: \$55 Filing Fee & Certified Copy         |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 |
| 2661 Executive Center Circle   | Tallahassee, Florida 32314   |

CR2E079 (5/06)

Tallahassee, Florida 32301



## 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                    | f the limited li | ability company as       | it appears on the records     | of the Flor     | rida Departn                       | ne n t     |
|-----------------------------------|------------------|--------------------------|-------------------------------|-----------------|------------------------------------|------------|
| of State is:                      | HANNA            | RUUSA BLE                | INTERNATIONAL                 | LLC.            |                                    |            |
|                                   |                  |                          |                               |                 |                                    |            |
| 2. This limited                   | liability comp   | oany was organized       | under the laws of:            |                 |                                    |            |
| 3                                 | TATTE Of F       | LORIDA                   | ,                             |                 |                                    |            |
|                                   |                  |                          | <del></del>                   |                 |                                    |            |
|                                   | •                |                          | f this limited liability comp | pany is:        |                                    |            |
| <u> </u>                          | 0007606          | °9                       | ·                             |                 |                                    |            |
| 4. I, <u>NOE</u><br>(Pr           | F RODE           | CIGNEZ<br>son Resigning) | , hereby resign as a          | MANAGE<br>(Prii | IL MEMR<br>nt Title)               | <u>E</u> L |
| of this limited<br>resignation in |                  | pany and affirm th       | e limited liability compan    | y has been      | notified of                        | m /        |
| Signature of                      | Resigning Me     |                          | lember or Manager             | <b>.</b>        | 11 APR 27<br>SECRETAR<br>TALLAHASS | 71         |
| Filing Fee:<br>Certified Copy     |                  | (Required) (Optional)    |                               | ·               | TARY OF STATE                      | LED        |
|                                   |                  | •                        |                               |                 | 2m <b>D</b>                        | 1          |

CR2E079 (5/06)