## L10000082643

| (Re                                     | equestor's Name)   |                 |  |  |
|---|--------------------|-----------------|--|--|
| (Address)                               |                    |                 |  |  |
| (Address)                               |                    |                 |  |  |
| (Cit                                    | ty/State/Zip/Phone | <del>9</del> #) |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL            |  |  |
| (Business Entity Name)                  |                    |                 |  |  |
| (Document Number)                       |                    |                 |  |  |
| Certified Copies                        | _ Certificates     | of Status       |  |  |
| Special Instructions to Filing Officer: |                    |                 |  |  |
|   | ·                  |                 |  |  |
|   |                    |                 |  |  |
|   |                    |                 |  |  |

Office Use Only



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12 MAR 21 PH 12: 5

C. LEWIS

MAR 2 2 2012

EXAMINER

## **COVER LETTER**

| TO: Registration Section Division of Corporations                       |   |
|---|---|
| SUBJECT: TTELCEL LLC (Name of Limited Liabi                             | lity Company)                               |
| ·   |   |
| The enclosed member, managing member or manage filing.                  | er resignation and fee(s) are submitted for |
| Please return all correspondence concerning this mat                    | tter to:                                    |
| Tatiana Zelaya  |   |
| (Contact Person)  |   |
| TTelcel LLC   |   |
| (Firm/Company)  |   |
| 235 Esat 46th St Apt 5F   |   |
| (Address)   |   |
| New York, NY 10017  |   |
| (City/State and Zip Code)   |   |
| For further information concerning this matter, pleas                   | e call:                                     |
| Tatiana Zelaya  | 646 <u>,</u> 2674555                        |
| at (  | a Code & Daytime Telephone Number)          |
| Foots and allows Code wheels and are obtained by Pl                     | and In December of Court Court              |
| Enclosed please find a check made payable to the Florida S25 Filing Fee | S55 Filing Fee &                            |
| \$23 Fitting Fee  | Certified Copy                              |
|   |   |
| STREET/COURIER ADDRESS:   | MAILING ADDRESS:                            |
| Registration Section  | Registration Section                        |
| Division of Corporations  | Division of Corporations                    |
| Clifton Building  | P.O. Box 6327                               |
| 2661 Executive Center Circle Tallahassee, Florida 32301                 | Tallahassee, Florida 32314                  |



FILED

12 MAR 21 PM I2: 51

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## 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: TTE        |   | t appears on the records of the Fl | orida Department |
|--|---|------------------------------------|------------------|
| 2. This limited liabi                      | lity company was organized u                            | under the laws of:                 |                  |
|  | ment/registration number of t  — L100000                | his limited liability company is:  |                  |
| of this limited liab<br>resignation in wri | ome of Person Resigning) willity company and affirm the | limited liability company has bed  | rint Title)      |
| <del>-</del>                               | \$25.00 (Required)<br>\$30.00 (Optional)                |                                    |                  |