L10000 123925

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)				
Certified Copies Certificates of Status	_			
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUВЛ	ECT: IB ECO TECHNOLOGIES		npany)
The enfiling.	nclosed member, managing member or ma	-	
Please	return all correspondence concerning this	matter to:	
ZOR	RAIDA ORTA		-
PRO	(Contact Person) PESSIONAL BUSINESS ADVI	ISORS II	, INC.
	(Firm/Company)		-
9485	S SUNSET DR STE A-200		-
	(Address)		
MIAN	MI FL 33173		_
	(City/State and Zip Code)		
For fu	rther information concerning this matter, p	olease call:	
ZOR	AIDA ORTA at	305	596-9333
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclos	sed please find a check made payable to th		epartment of State for: 55 Filing Fee & Certified Copy
Registr Division Clifton 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations n Building Executive Center Circle assee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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 limited liability company as it of State is: IB ECO TECHNOLOGIES	•
2. This limited liability company was organized un FLORIDA	nder the laws of:
3. The Florida document/registration number of the L10000123925	is limited liability company is:
4. I. MAIGUALIDA TORRES	hereby resign as a MANAGER
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the I resignation in writing.	imited liability company has been notified of my
Signature of Resigning Member, Managing Mer	nber or Manager