11000003732

(Requestor's Name)			
(Address)			
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SECRETARY OF STATE ALLAHASSEF, FIORINA

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: DIABETBCCK LLC (Name of Limited Liability Compa	any)			
The enclosed member, managing member or manager resignatiling.	ation and fee(s) are submitted for			
Please return all correspondence concerning this matter to:				
Kevin D Dennis Esq. (Contact Person)				
Law offices of Kevin D Dennis	215			
1430 S. Dixie Huy Ste. 314				
Miami, FL 33146 (City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (305) (Area Code &	577-03// Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida De \$25 Filing Fee \$5	partment of State for: 5 Filing Fee & Certified Copy			
Registration Section For Division of Corporations Clifton Building F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314			



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 ap	opears on the records o	f the Florida Department
of State is:	DIABETBOOK	LLC	<u> </u>
2. This limited liab	ility company was organized und	der the laws of:	
Floric	<u>la</u>		
3. The Florida docu	ument/registration number of this	s limited liability comp	any is:
	00003732	• -	•
		_	
4. I, Claudi	OA Natoli, SR Tame of Person Resigning)	_, hereby resign as a	(Print Title)
of this limited lial	bility company and affirm the lin	nited liability company	has been notified of my
resignation in wh	iting.		
$x \mid \mathcal{L}$			
Signature of Resi	igning Member, Managing Meml	ber or Manager	
		J	
	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		

CR2E079 (5/06)

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SECRETARY OF STATE
TALLAHASSEE FI ONLE