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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lasco America Linited	
The enclosed member, managing member or manafiling.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this r	matter to:
Anthony Lauro (Contact Person)	
(Contact Person) (ASCO AMERICA Grace (Firm/Company)	in tallaha
2351 Lakeview (Address) SeBring, & 338	OR.
SeBring, R 338	270 RATE REP
For further information concerning this matter, planting LAURO at (401, 429.9297
(Name of Contact Person) Enclosed please find a check made payable to the \$25 Filing Fee	Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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 the	limited liability company as	it appears on the records of the Fl	orida Department
of State is:	Lasco americ	ca Grap, LLC.	
2. This limited liab	lity company was organized		SECRETARY OF
		f this limited liability company is:	STATE LORIDA
4. I, Gabije	. Carrasco Jame of Person Resigning)	, hereby resign as a M	GR. rint Title)
of this limited lia resignation in wr		e limited liability company has be	en notified of my
Sold			
Signature of Res	gning Member, Managing N	Member or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		