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

TO: Registration Section **Division of Corporations** SUBJECT: Red Star Cruises, LLC (Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: **Edward Farrell** (Contact Person) Red Star Cruises LLC (Firm/Company) 5836 Rodman Street (Address) Hollywood, FL 33023 (City/State and Zip Code) For further information concerning this matter, please call: at (954) 317-0088 (Area Code & Daytime Telephone Number) Edward Farrell (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & ■ \$25 Filing Fee Certified Copy MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations**

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as d Star Cruises, LLC	s it appears on the records of th	e Florida Department	
2. This limited liab	ility company was organized	d under the laws of:		
3. The Florida docu L110000521	•	f this limited liability company	y is:	
4. I, Carem Costa (Print Name of Person Resigning)		, hereby resign as a MG	, hereby resign as a MGR (Print Title)	
,	bility company and affirm th	ne limited liability company ha		
	em Costa Igning Member, Managing M	Member or Manager		
-		g		
	\$25.00 (Required)			
Centilled Copy:	\$30.00 (Optional)		<u></u>	

CR2E079 (5/06)