L1100061973

| (Re | equestor's Name) | |
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| (Ac | ddress) | |
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| (A | ddress) | |
| | | |
| (Ci | ity/State/Zip/Phone | e #) |
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| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Bo | usiness Entity Nar | ne) |
| | | |
| (De | ocument Number) | |
| | | |
| Certified Copies | Certificates | s of Status |
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| | | |
| Special Instructions to | Filing Officer: | |
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Office Use Only

B. KOHR

APR 2 4 2012

EXAMINER



600230075726

04/20/12--01013--016 **25.00

SENT

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|---|
| SUBJECT: TORO P160 (Name of Lim | EON AND BIRD Supplies |
| The enclosed member, managing member or filing. | r manager resignation and fee(s) are submitted f |
| Please return all correspondence concerning (Contact Person) | this matter to: |
| Osva do R. OR | 0260 P.A |
| 122 MINOR CA (Address) | Ave |
| City/State and Zip Code | florida 33134 |
| For further information concerning this matter of Contact Person) | er, please call: at (305) 856-3733 (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable t \$25 Filing Fee | o the Florida Department of State for: \$55 Filing Fee & Certified Copy |
| 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

| | e of the limited liability company as it appears on the records of the Florida Department |
|--------------|--|
| of State | is: TORO PIGEON AND BIRD SUPPLIES, LLC |
| 2. This limi | ted liability company was organized under the laws of: FLORIDA |
| 3. The Flori | Ida document/registration number of this limited liability company is: |
| 4. I, | ANDIGH CASTRO SIERLA, hereby resign as a <u>member < Manager</u> (Print Name of Person Resigning) (Print Title) |
| of this lim | ited liability company and affirm the limited liability company has been notified of my n in writing. |
| | of Resigning Member, Managing Member or Manager |
| Signature | or Resigning Memoer, Managing Memoer or Manager |
| Filing Fee: | \$25.00 (Required) |

Certified Copy:

\$30.00 (Optional)