-1110000069568

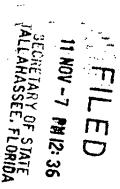
(Requestor's Name)	
(Address)	_
,	
(Address)	
(City/State/Zip/Phone #)	
(City/State/Zip/Filone #)	
PICK-UP WAIT	MAIL
,	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	s
Special Instructions to Filing Officer:	
•	ŀ
	1

Office Use Only



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11/07/11--01013--007 **25.00



D. BRUCE

NOV 0 8 2011

EXAMINER

COVER LETTER

TO: Registration Section			•
Division of Corporations			
SUBJECT: AG & G Beach, LLC			
(Name of Limited I	Liability Cor	mpany)	-
The enclosed member, managing member or marfiling.	nager resig	gnation and fee(s) are	e submitted for
Please return all correspondence concerning this	matter to:		
Alvaro Castillo		_	
(Contact Person)			
Castillo & Associates		_	
(Firm/Company)			
1390 Brickell Avenue, Suite 200			<u> </u>
(Address)		_	LAFE T
Miami, FL 33131			FIL NOV-7 AHASSE
(City/State and Zip Code)		_	ILED -7 MIZ:
For further information concerning this matter, p	lease call:		E PLORIBLE
Alvaro Castillo at (305	371-5540	D .
(Name of Contact Person)	Area Code	& Daytime Telephone	e Number)
Enclosed please find a check made payable to the \$25 Filing Fee		Department of State f \$55 Filing Fee & Certified Copy	îor:
STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon Building	,	MAILING ADDR Registration Section Division of Corpora P.O. Box 6327	n
Clifton Building		Tollohossee Florids	. 30314

10 m

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 limited liability company as i	t appears on the records	s of the Florid	a Depar	tment
•			Ä	Cr	
2. This limited lia FLORIDA	bility company was organized	under the laws of:	LAHAS	ECRETA	7
3. The Florida doc L1100006	cument/registration number of t	this limited liability con	mpany is: 23	7 MH 12: 36	LED
		<u>—</u>	A		
_{4. I,} Sergio Ru	ıchtein	, hereby resign as a	Managing	g Men	nber
(Print)	Name of Person Resigning)		(Print	Title)	
of this limited lia resignation in w	ability company and affirm the riting.	limited liability compa	ny has been n	otified (of my
	week_	·			
Signature of Res	signing Member, Managing Me	ember or Manager			
Filing Fee:	\$25.00 (Required)				
Certified Conv.	\$30.00 (Ontional)				