LW000072166

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: Instudio Design, 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:

Miguel Sanchez				
	(Contact Person)	· · · · · · · · · · · · · · · · · · ·		
	(Firm/Company)			
	(Fine Company)			
00045				
2004 Ra	in Dance Place			
2004 Ra	in Dance Place (Address)			
	······································			

For further information concerning this matter, please call:

Miguel	San	che	ez.	٠	at (813	67	79.	-65	52

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

TO THE SECOND SE

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

	limited liability company as udio Design, LLC	it appears on the record	s of the Florida Department
2. This limited liab Florida	ility company was organized	under the laws of:	
3. The Florida docu G11000067	iment/registration number of		mpany is:
4. I, Miguel San	chez	hereby resign as	_a Manager
	ame of Person Resigning)		(Print Title)
resignation in wr	bility company and affirm the iting. gning Member, Managing M		any has been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		