## hmpselfefile.sunbiz.org/soripts/efilcovr.exc

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150000305983)))

H150000305983ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

70:

Division of Corporations

Fax Number

1 (850) 617-6383

Prom;

Account Name : TAXLEAF.COM INC

Account Number : 120140060084

Phone : (305)541-3980

Fax Number : (305)541-7033

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

CCD at any

FEB 0 6 2015

R. WHILE

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ETROG LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

RECEIVED
FEB-5 AHIO: 00
ELLO GE COMMANDO
GENATION SERVICES
GENATION SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

1 nact

H 150000305983





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1.1100007432	_	tion number ass	signed to this limited liability company is:
A1	·,	r withdrew/resi	gned or will withdraw/resign is: 09/27/2013
CESAR M S		T.	hereby withdraw/resign as a
(Prim.) VANAGER	Name of Person R	esigning)	
.,	(Print Title)	<del></del>	
f this limited lis esignation in w		y and affirm the	ellmited liability company has been notified of my
	issociating Me	mber or Regign	ning Manager
Signature of D			•

CF E179 (2/14)

H150000 305 983