## 110000011

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
JUL'2 4 2013 L. SELLERS

Office Use Only



600249992496

**600243932436** 07/22/13--01047--021 \*\*25.00

SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: US INVESTMENT DEVELOPMENT & CONSUMENTS LICE (Name of Limited Liability Company)		
(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:		
TUAN R. BERNAL  (Contact Person)  (Firm Company)		
15706 SW 72 5 7 SUITE 401  (Address)    Ham' Fl 33193  (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person)  (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 \$  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

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

1. The name of the limited liability company as it ap of State is: LIS INVESTMENT	opears on the records of the Florida Department  The Volonment & Consultants LCC
2. This limited liability company was organized und	ler the laws of:
3. The Florida document/registration number of this \( \begin{align*} al	
4. I, RIVAS HENGO DAVID YECID  (Print Name of Person Resigning)	hereby resign as a Yon a ger (Print Title)
of this limited liability company and affirm the limited resignation in writing.	
Signature of Resigning Member, Managing Memb	per or Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	

CR2E079 (5/06)