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To: Division of Corporations : (850)617-6383 Fax Number From: : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON Account Number : I20060000135 Phone : (305)789-3200 Fax Number : (305)789-3395 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAHON CONSULTING GROUP, LLC Certificate of Status 0 Certified Copy 01 Page Count \$25.00 Estimated Charge

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J. SAULSBERRY EXAMINER MAR _ 6 2012





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 appears on the records of the Floridan Conculting Group 11 C	orida Departn	nent
of State is: Mahon Consulting Group, LLC		 ·
2. This limited liability company was organized under the laws of: Florida	2012 MAR -2 SECRETARY TALLAHASSI	
3. The Florida document/registration number of this limited liability company is: L11000080200	AM 8:42	E. Sand
4. I, Alfonso Ordovas Gomez-Jordana, hereby resign as a Manag	er	
(Print Name of Person Resigning) (Pr.	int Title)	_
of this limited liability company and affirm the limited liability company has been resignation in writing	n notified of	my
Signature of Resigning Member, Managing Member or Manager		
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)		