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SECRUTARY OF STATE

C. LEWIS

JAN 2 6 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Biscayne (Name of Limited	X press	UC
The enclosed member, managing member or ma filing.		
Please return all correspondence concerning this	matter to:	
Vivian Garcia (Contact Person)	 	
Biscayne X Press L	ec.	
795 NE 80 STREET	-	
MIAMI FL 3313 (City/State and Zip Code)	8	
For further information concerning this matter, p	olease call:	
(Name of Contact Person) at	(<u>786</u>) <u>42</u> (Area Code & Daytin	36-8562 ne Telephone Number)
Enclosed please find a check made payable to th \$25 Filing Fee	e Florida Departme \$55 Filing Certifi	nt of State for: g Fee & led Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registra	NG ADDRESS: tion Section to of Corporations x 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



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2012 JAN 25 AM 104 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	nited liability company a Biscayne			f the Florida Department
2. This limited liability Florida.	ty company was organize	ed under	the laws of:	
	ent/registration number of	of this li	mited liability comp	any is:
4. I, David	Halevy e of Person Resigning)	,	hereby resign as a	MGR (Print Title)
of this limited liabil resignation in writing	ity company and affirm t	he limit	ed liability company	has been notified of my
Signature of Resign	ing Member, Managing	Membe	r or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			