

L11000129963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

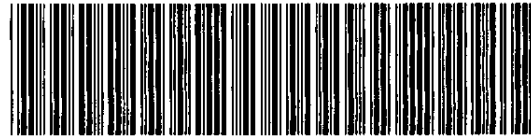
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ITSOFTEL COMMUNICATION USA, 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:

ROSA PHILLIPS  
(Contact Person)

ITSOFTEL COMMUNICATION USA, LLC  
(Firm/Company)

1717 N BAYSHORE DR. APT. #2647  
(Address)

MIAMI, FL 33132  
(City/State and Zip Code)

For further information concerning this matter, please call:

ROSA PHILLIPS at ( 305 ) 731-4695  
(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





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

12 JAN 20 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

November 30, 2011

ROSA PHILLIPS  
ITSOFTEL COMMUNICATION USA  
1717 N BAYSHORE DR - APT 2647  
MIAMI, FL 33132

SUBJECT: ITSOFTEL COMMUNICATION USA, LLC  
Ref. Number: L11000129963

We have received your document for ITSOFTEL COMMUNICATION USA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 211A00026836



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 Florida Department of State is: ITSOFTEL COMMUNICATION USA, LLC

2. This limited liability company was organized under the laws of:  
FLORIDA

3. The Florida document/registration number of this limited liability company is:  
L11000129963

4. I, MARIO J. LARA ENCARNACION, hereby resign as a MGRM  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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DIVISION OF CORPORATIONS  
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