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SECRETARY OF STATE

J. BRYAN

JUL 31 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: AA DOUBLE LLC	
(Name of Limited Liabi	lity Company)
The enclosed member, managing member or manage filing.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this mat	tter to:
DARIO ALVAREZ	
(Contact Person)	
ANDINO CONSULTING GROUP INC	75 E
(Firm/Company)	
8421 S ORANGE BLOSSOM TR STE	TALLAHASSEE, FLORIS
(Address)	
ORLANDO FL 32809	2: 32
(City/State and Zip Code))
For further information concerning this matter, pleas	se call:
at (107 ₎ 376-2911
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Fl	orida Department of State for: \$55 Filing Fee &
₩ \$25 Fining Fee	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as in	appears on the records	s of the Florio	da Dep	artm	ent
2. This limited liabil FLORIDA	ity company was organized u	under the laws of:				
3. The Florida docur L12000014	ment/registration number of t 298	his limited liability cor	npany is:			
(Print Na	me of Person Resigning) Ility company and affirm the	, hereby resign as a limited liability compa	(Frint	Title)	d of	— my
* John	2	ombor or Manager	Š	_†: № დე	K	
	ning Member, Managing Me \$25.00 (Required) \$30.00 (Optional)	emoer or manager	רדיםם מיסיברי דרטאו		2012 JUL 30 PM 2:	FILED