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(Rec	questor's Name)		
(Add	dress)		
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(City	y/State/Zip/Phone	- 	
(Cit)	y/State/Zip/Filon	= #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to I	Filing Officer:		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SANTOS VENTURES LLO	
(Name of Limited L	iability Company)
The enclosed member, managing member or manifiling.	ager resignation and fee(s) are submitted
Please return all correspondence concerning this r	matter to:
LUIS SANTOS-ZANELLI	
(Contact Person)	
SANTOS VENTURES LLC	
(Firm/Company)	
6561 MARBELLA LANE	
(Address)	
NAPLES, FL 34105	
(City/State and Zip Code)	
For further information concerning this matter, pl	ease call:
LUIS SANTOS-ZANELLI at (239) 877-2133
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$55 Filing 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 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

GER NY

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

appears on the records of the Florida Department C
under the laws of:
his limited liability company is:
, hereby resign as a MGRM
(Print Title)
limited liability company has been notified of my

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: