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SECHETARY OF STATE.

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COVER LETTER

Division of Corporations	
SUBJECT: Alvfran Trading LLC (Name of Limited Liability Company)	
(Name of Elimited Elability Company)	
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Jose A. Torres	
(Contact Person)	
IN Accounting & Tax Services	
(Firm/Company)	
10305 NW 41st Street, Suite 116 (Address)	
Dord, FL 33178	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (305) 477 - 2609 (Area Code & Daytime Telephone Number)	
(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 \$\infty\$	
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



FILED 2: 45

SECRETARY OF STATE FALLAHASSEE, FLORIDA

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:	Alufran Tradius	LLC	
2. This limited liab	oility company was organiz		
	ument/registration number	of this limited liability com	pany is:
4. I, Maria	L. Suarez	, hereby resign as a	MANGSer (Print Title)
	bility company and affirm	the limited liability compar	
Man 4	Sing		
Signature of Res	igning Member, Managing	Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		