03/25/2015 10:14 Division of Corporations

## Florida Department of State

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Division of Corporations

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From:

ACCOUNT Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090

Phone fax Number : (305)670-1991 : (305)670-1993

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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## LLC AMNO/RESTATE/CORRECT OR M/MG RESIGN PAMPA NETWORK LLC

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15 MAR 25 PM 2: 21



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER. MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605,0216, Florida Statutes)

| 1. The name of the limited liability company as            | it appears on the records of the Florida Department  |
|--|--|
| of State is: PAMPA NETWORK LLC                             |  |
| 2. The Florida document/registration number a L12000103265 | ssigned to this limited liability company is:        |
| 3. The date this member/manager withdrew/res               | signed or will withdraw/resign is: 03/25/2015        |
| ANNICHIMI NICOLAC  |  |
| (Prine Name of Person Resigning)                           | hereby withdraw/resign as a                          |
| MGRM   | •  |
| (Print Title)  |  |
| resignation in writing,                                    | ne limited liability company has been notified of my |
| Must   | ·  |
| Signature of Dissociating Member or Resig                  | ning Manager   |
|  |  |