112000109387

| (Requestor's Name) | _ |
|---|---|
| (Requestors Name) | |
| | |
| (Address) | |
| | |
| (Address) | _ |
| | |
| (City/State/Zip/Phone #) | _ |
| | |
| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | _ |
| | |
| (Document Number) | _ |
| | |
| Certified Copies Certificates of Status | |
| | _ |
| | _ |
| Special Instructions to Filing Officer: | |
| | |
| | |
| | j |
| | |
| | Į |
| | |
| | ╝ |

Office Use Only



000245805160

03/26/13--01017--005 **25.00

2018 HAR 26 PH 12: 1 1
SECRETARY OF STATE

MAR 2 7 2013

0 5 ...

COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|---|--|----------------------------------|----------|
| SUBJECT: MAJUMO LLC (Name of Limited Liability Com | many) | | |
| The enclosed member, managing member or manager resign filing. | | itted for | |
| Please return all correspondence concerning this matter to: | | | |
| Lisette Salazar, Esq. | | | |
| (Contact Person) | - | | |
| | - | | |
| (Firm/Company) | | | |
| 200 Crandon Blvd. #311 | | 2013 FALL | eseriy. |
| (Address) | - | A A | |
| Key Biscayne, Fl. 33149 | | 26 ASSE | r reserv |
| (City/State and Zip Code) | | PH 12: 1 | |
| For further information concerning this matter, please call: | | 91218 91218 :2 1 | Chi. |
| Lisette Salazar, Esq. at (305 | 361-6161 | | |
| | & Daytime Telephone Num | ber) | |
| Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$ \$25 Filing Fee | epartment of State for: 55 Filing Fee & Certified Copy | | |
| | MAILING ADDRESS: | | |
| - | Registration Section | | |
| | Division of Corporations P.O. Box 6327 | | |
| Cinton bunding | 1 .O. DOX 0321 | | |

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| of State is: MA | imited liability company as IUMO LLC | s it appears on the records | of the Florida Dep | artment | |
|--|--|------------------------------|----------------------|----------------|----|
| 2. This limited liabi | lity company was organized | d under the laws of: | | | |
| 3. The Florida documents | ment/registration number o | f this limited liability com | npany is: | | |
| • | me of Person Resigning) | , hereby resign as a | (Print Title) | | |
| of this limited liab resignation in-writ | ility company and affirm thing. | e limited liability compar | ny has been notified | of my 2013 HAR | 11 |
| Signature of Relig | ning Member, Managing N | Member or Manager | ASSET OF | 4R 26 PH | |
| Filing Fee: / Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | SIME | 12:11 | |