L12000143192

(Re	equestor's Name)			
(Ac	idress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
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J. SAULSBERRY EXAMINER

DEC 27 2012

COVER LETTER

Tallahassee, Florida 32301

CR2E079 (5/06)

TO: Registration Section Division of Corporations			
EL HUESERO-BONES R US-NATURE'S SUBJECT:	PLACE (PRODUCTS, HERBS & MORE) LLC		
(Name of Limited L	iability Company)		
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for		
Please return all correspondence concerning this	natter to:		
ROGER CORRALES			
(Contact Person)			
EL HUESERO-BONES R US-NATURE'S PLACE (PRODUCTS, HERBS	& MORE) LLC		
(Firm/Company)	AN ST		
108 ROBIN ROAD	ARY O		
(Address)	, FLOR		
ALTAMONTE SPRINGS, FL	32701		
(City/State and Zip Code)			
For further information concerning this matter, ple	ease call:		
(Name of Contact Person) at (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the	Florida Department of State for:		
□ \$25 Filing Fee	□ \$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 32314		



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 ap of State is: EL HUESERO-BONES R US-NATURE	•			
2. This limited liability company was organized und FLORIDA	ler the laws of:	SEIRLIAF TÄLLANAS	2012 DEC 20	元
3. The Florida document/registration number of this L12000143192	limited liability company is	EY OF STATE SEF. FLORIDA	D AM 8 20	
4. I, JASON M CORRALES	, hereby resign as a MGR	М		
(Print Name of Person Resigning)	-	(Print Title)		
of this limited liability company and affirm the lim resignation in writing.	ited liability company has b	een notified	of my	
	MSRM	DEC	12/	12012
Signature of Resigning Member, Managing Memb	er or Manager	<i>م</i>		
Filing Fee: \$25.00 (Required)				

Certified Copy:

\$30.00 (Optional)