L13000060514

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SECRETARY OF STATE
ANASSEF, FLORIDA

JUN 28 2013 J. BRYAN

5121-11122

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HEALTH CANE REFORM (Name of Limited Liability Con	RM ADVISORS LLC.
The enclosed member, managing member or manager resigning.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
JOHN B. SABINA (Contact Person)	_
(Contact Person)	TALL
(Firm/Company)	JUN 2
	2013 JUN 27 PM 12: 40 SECRETARY OF STATE TALLAHASSEE, FLORIC
(Address)	- Contraction
14738 Sew 132 AVE (Address) HIANI FL 33186	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
15/th G SABINA at (305) (Name of Contact Person) (Area Code	496 0222
(Name of Contact Person) (Area Code	e & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I	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

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301

TO:



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 of State is:	limited liability company as i	t appears on the records of	the Florida Depa	artment
2. This limited liab	ility company was organized	under the laws of:		
3. The Florida docu	ument/registration number of 6000060514	this limited liability compa	ny is:	
of this limited lial	CABLELA Came of Person Resigning) bility company and affirm the			of my
	ello Calrera gning Member, Managing M			
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	<i>G</i> ·	SECRETARY OF ! TALLAHASSEE, FI	FILE C