# U300008886

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DEC 2 0 2013

#### COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: LUKIGROUP, LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

#### ALVARO CASTILLO

(Contact Person)

#### CASTILLO & ASSOCIATES

(Firm/Company)

#### 1390 BRICKELL AVENUE SUITE 200

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

**ALVARO CASTILLO** 

(Name of Contact Person)

 $\underbrace{(305)}_{\text{(Area Code \& Daytime Telephone Number)}} 371-5540$ 

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:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

#### **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

2. This limited liability company was organized und FLORIDA		
TEOTIIDA	SEERE DECAHA	
3. The Florida document/registration number of this L13000080886	limited liability company is:	
4. I, LITTORIA COSSIANI (Print Name of Person Resigning)	, hereby resign as a MANAGER (Print Pite)	Ö
of this limited liability company and affirm the lim resignation in writing.	(* •)	r

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)