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SECRETARY OF STATE

DEC 2 0 2013 T. BROWN

COVER LETTER

TO: Registration Section Division of Corporations		
•		
SUBJECT: Gaston & Pilor		
(Name of	Limited Liability Con	ubaui.)
The enclosed member, managing member filing.	er or manager resig	nation and fee(s) are submitted for
Please return all correspondence concern	ing this matter to:	
Marcos D Franco		
(Contact Person)		-
Gaston & Pilorget LLC	;	
(Firm/Company)		-
12179 SW 125 Ct		
(Address)		-
Miami, FL 33186	•	
(City/State and Zip Code)		~
For further information concerning this r	natter, please call:	
Marcos Franco	_{at (} 786	286-4082
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payat	ole to the Florida D	epartment of State for:
■ \$25 Filing Fee \$25 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

CR2E079 (5/06)

Tallahassee, Florida 32301





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 liabil of State is: Gaston & Pilo		he records of the Florida Department
2. This limited liability company Florida	was organized under the laws	s of:
3. The Florida document/registra	tion number of this limited lia	ability company is:
4. I, Maria J Pilorget (Print Name of Person F	Resigning), hereby re	esign as a MGR (Print Title)
,	**	ty company has been notified of my
- flur	_	
Signature of Resigning Members	er, Managing Member or Mana	ager
Filing Fee: \$25:00 (R. Certified Copy: \$30.00 (O	•	

CR2E079 (5/06)