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## **COVER LETTER**

2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (2/14)

TO: Registration Section Division of Corporations		
SUBJECT: The SAR Group for Regulate	ory and Cor	npliance Consulting, LLC
	ited Liability C	ompany)
The enclosed member, resignation or dissociate	ation and fee	(s) are submitted for filing.
Please return all correspondence concerning	this matter to	):
Orlando Alvarez Fuentes		
(Contact Person)		_
The SAR Group, LLC		
(Firm/Company)		<del>_</del>
8580 NW 6th Lane Apt 205		
(Address)		<del>_</del>
Miami, FL, 33126		
(City/State and Zip Code)		_
For further information concerning this matter	er, please call	1:
Orlando Alvarez Fuentes	786	5146171
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee		Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as it	appears on the records of the Florida Dep	artiment =
of State is:	SAR Group for Regulatory	and Compliance Consulting, LLC	_ <u></u>
2. The Florida docu L16000063222	•	igned to this limited liability company is:	-6 AM11:
3. The date this men	mber/manager withdrew/resig	ned or will withdraw/resign is:	16 <sup>있</sup>
4. I,	iguez Dominguez  ame of Person Resigning)	, hereby withdraw/resign as a	
MGR	amo o, rosson nesignings		
(	Print Title)		
of this limited liab resignation in wri	\ ' \ \ / '	limited liability company has been notified	d of my
Signature of Dis	ssociating Member or Resigni	ng Manager	
_	\$25.00 (Required) \$30.00 (Optional)		