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TO: R	egistration Section						
D	ivision of Corporations						
SUBJEC	FUELSMARTER LLC	FUELSMARTER LLC					
	(Name o	(Name of Limited Liability Company)					
The enclo	osed member, resignation or dis	ssociation and fee	e(s) are submitted for filing.				
Please ret	urn all correspondence concert	ning this matter t	o:				
CARLOS	E. BURGOS G.						
	(Contact Person)						
BURGOS	LAW GROUP LLC						
	(Firm/Company)						
48 WALL	STREET, SUITE 1100						
-	(Address)		<u> </u>				
NEW YOR	RK, NY 10005						
	(City/State and Zip Code)		- _				
For furthe	er information concerning this i	natter, please cal	il:				
CARLOS I	BURGOS	212 at (9184459				
	(Name of Contact Person)		de & Daytime Telephone Number)				
Enclosed	please find a check made payal						
■ \$ 25 Fi	ling Fee	⊈ \$55 Fili	ng Fee & Certified Copy				
	ailing Address:		Street Address:				
	egistration Section		Registration Section				
Division of Corporations P.O. Box 6327			Division of Corporations				
	llahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
			Tallabaceae FL 32303				



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)

	-	s it appears on the records of the Florida Department
		ssigned to this limited liability company is:
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:
4. I, LEONEL LEON (Print Name of Person Resigning)		, hereby withdraw/resign as a
MANAGER		
	Print Title)	
of this limited lial resignation in wr	· · · · · · · · · · · · · · · · · · ·	ne limited liability company has been notified of my
Lu	ssociating Member or Resig	>
Signature of Di	ssociating Member or Resig	ning Manager
	\$25.00 (Required) \$30.00 (Optional)	