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COVER LETTER

TO: Registration Section Division of Corporations

RED DIAMOND FOOD SERVICES LLC SUBJECT:	o e e e e e e e e e e e e e e e e e e e
	Liability Company)
The enclosed member, resignation or dissociatio	on and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Larry Harshman, Esq.	
(Contact Person)	
Harshman Law, P.A.	
(Firm/Company)	
Po Box 770968	
(Address)	
Miami, FL 33177	
(City/State and Zip Code)	
For further information concerning this matter, p	blease call:
Larry Harshman	305 763-9050 ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	e Florida Department of State for:
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314







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

(Pursuant to 605.0216, Florida Statutes)

2. The Florida document/registration number assigned to this limited liability company is: 1.22000073250 3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4. I. Rigoberto Corea (Print Name of Person Resigning) AMBR (Print Title) of this limited liability company and affirm the limited liability company has been notified of nesignation in writing. Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required)		DIAMOND FOOD SERVICES LLC	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4. I. Rigobeno Corea (Print Name of Person Resigning) AMBR (Print Title) of this limited liability company and affirm the limited liability company has been notified of nesignation in writing. Signature of Dissociating Member or Resigning Manager		ment/registration number assig	gned to this limited liability company is:
AMBR (Print Name of Person Resigning) AMBR (Print Title) of this limited liability company and affirm the limited liability company has been notified of nesignation in writing. Signature of Dissociating Member or Resigning Manager	3. The date this me	mber/manager withdrew/resign	ned or will withdraw/resign is:
of this limited liability company and affirm the limited liability company has been notified of nesignation in writing. Signature of Dissociating Member or Resigning Manager		ame of Person Resigning)	, hereby withdraw/resign as a
of this limited liability company and affirm the limited liability company has been notified of nesignation in writing. Signature of Dissociating Member or Resigning Manager		.	
Signature of Dissociating Member or Resigning Manager	1	(Print Title)	
		• • • • • • • • • • • • • • • • • • • •	imited liability company has been notified of my
Filing Fee: \$25.00 (Required)	Signature of Di	ssociating Member or Resignii	ng Manager
Certified Copy: \$30.00 (Optional)	•	• •	