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TAIL AHASSEF FLORIDA

COVER LETTER

Proceedings	
SUBJECT: Ortiz-Parra Enterprises, LLC (Name of Limite	ed Liability Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing N	Member or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Luis A. Cordero, Esq. (Name of Person)	,
Cordero & Associates, P.A. (Firm/Company)	
200 S. Biscayne Blvd. Suite 4650	·
Miami, Florida 33131 (City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
Luis A. Cordero, Esq.	at (305) 777-2677
(Name of Person)	(Area Code & Daytime Telephone Number)
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
Enclosed is a check for the following amount:	
\$25 Filing Fee	\$55 Filing Fee &

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Zobeida Marina Parra de Sosa	, hereby resign as Member	
	(Title)	
of Ortiz-Parra Enterprises, LLC		
(Limited	Liability Company)	
a limited liability company organized under t	he laws of the State of Florida	
and affirm that the limited liability company	has been notified in writing of the resignation.	
_		

(Signature of resigning manager, managing member or member)

OG DEC 26 PM 12: 27
SECRETARY OF STATE
TAIL AHASSEF, FLORIDA

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314