# M12000000189

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T. HAMPTON

### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

### SUBJECT: MILLPORT ASSOCIATES USA, LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

# Alberto Carbi Haubold (Contact Person) Caluz LLC (Firm/Company) 9737 NW 41st St Ste # 446 (Address) Doral, FI 33178

For further information concerning this matter, please call:

(City/State and Zip Code)

### Alberto Haubold

<sub>31</sub>,305

300 8910

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

□ \$25 Filing Fee

■ \$55 Filing Fee & Certified Copy

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (5/06)

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as LPORT ASSOCIATES	it appears on the records of the Florida USA, LLC	Department
2. This limited liab Florida	ility company was organized	l under the laws of:	
3. The Florida docu M12000000		f this limited liability company is:	
4. 1, Alberto Carbi Haubold  (Print Name of Person Resigning)		, hereby resign as a MGR	
of this limited lia resignation in wr	10	e limited liability company has been not	ified of my
Signature of Res	igning Member, Managing N	1ember or Manager	envisio 13 FE
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		B 27 AN 9: 50

CR2E079 (5/06)