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EXAMINER

COVER LETTER

10:	Division of	Corporations			
SUBJ	ECT:	KEYSTONE	INVESTMENT	SOLUTIONS	بالالا
		(Name	of Limited Liability Com	oany)	
The efiling.		per, managing mem	ber or manager resign	ation and fee(s) a	re submitted for
Please	return all con	respondence conce	erning this matter to:		
	MATTI	TEM REECE			
-	- 1	(Contact Person)			
	KEYSTO	ONE INVESTM (Firm/Company)	ENT SOLUTIONS	LLC	
		(r im/company)			
	1133 BA	L HARBOR B	BLVD., SUITE 113	19, #221	
		(Address)		·	Page 1
	Punia	GORDA, FL	33950		CHETARY LAHASSE
	ı	(City/State and Zip Code)		, , ,
For fu	rther informa	tion concerning thi	s matter, please call:		OF STATE OF
	MATTHE	W REECE	at (94)	661 - 097	૪ 🚆 🛣
	(Name of	Contact Person)	(Area Code &	& Daytime Telephor	ne Number)
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	on of Corpora	ations		Division of Corpo	rations
	n Building Executive Cer	stor Cirolo		P.O. Box 6327 Tallahassee, Floric	d. 2221 <i>4</i>
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Tallahassee, Florida 32301

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the l	limited liability co ८६४ऽ७०८६	ompany as it appo INVESTME	ears on the records	of the Florida De	partment
2. This limited liabi		s organized under			
3. The Florida docu M1700	ment/registration	number of this li	mited liability com	pany is:	
4. I, JULIE	REECE ime of Person Resign	, 1	hereby resign as a _	MANAGING (Print Title)	MEMBER
	ility company an		ed liability compan		
•			Manager Manager	SECRETAL TAILLAHAS	2012 July 2
Filing Fee: Certified Copy:				RY OF STAI	