

LO5000040015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

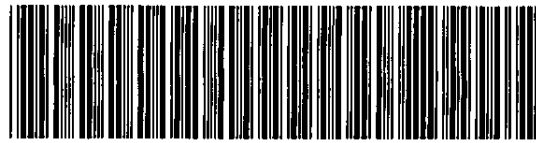
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Mr. Semerant GAVE
AUTHORIZATION BY PHONE TO
CORRECT DOC# TO LO5-40015
DATE 3/20/07
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR 19 PM 12:03

B. Tedlock MAR 20 2007

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Castor Homes Construction Group 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:

JEAN-Romel Semexant
(Contact Person)

Castor Homes Construction Group LLC
(Firm/Company)

14744 LAGUNA BEACH Circle
(Address)

ORLANDO FL 32824
(City/State and Zip Code)

For further information concerning this matter, please call:

JEAN-Romel Semexant at (407) 825 95 01
(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

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR 19 PM 12:03

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Castor Homes Construction Group LLC.

2. This limited liability company was organized under the laws of:
State of Florida

3. The Florida document/registration number of this limited liability company is:
L05000040015

4. I, ANDREI POLIZANOV, hereby resign as a Member
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)