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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	¥)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	<del>)</del>
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Echeck 21, LLC (Name of Limit	ited Liability Company)	
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for t	filing.
Please return all correspondence concerning this r	matter to the following:	
Alan Waserstein (Name of Person)		
Echeck 21 LLC (Firm/Company)		
6001 NW 153 Street #110		.=
(Address)  Miami Lakes, FL 33014  (City/State and Zip Code)		
For further information concerning this matter, pl	lease call:	
Alan Waserstein (Name of Person)	at (305) 827-8373 (Area Code & Daytime Telephone Number)	ACTION OF THE PROPERTY OF THE
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 & Certified Copy	



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

### RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Alan Waserstein	, hereby resign as MGRM (Title)			
of Echeck 21 LLC (Limited Liability		,		
a limited liability company organized under the law and affirm that the limited liability company has be (Signature of resigning manager, r	en notified in writing of the resignation.		65 OCT 11 FILIZ: 06	

#### 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