LD8000058309

(Re	equestor's Name)			
, (Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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COVER LETTER

TO: Registration Section Division of Corporations

RIDGEWOOD 715 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:

Owen S. Freed

(Contact Person)

Law Offices Owen S. Freed P.A.

(Firm/Company)

2655 LeJeune Road, Suite 316

(Address)

Coral Gables, FL. 331340

(City/State and Zip Code)

For further information concerning this matter, please call:

Owen S. Freed

(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:

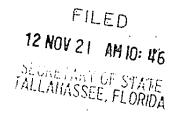
Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

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

CR2E079 (5/06)





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 gewood 715 LLC	it appears on the records of the Florida Department
2. This limited liab Florida	ility company was organized	under the laws of:
3. The Florida docu L080000583	_	f this limited liability company is:
4. I, Sergio Guardazzi		, kereby resign as a Managing Member
- (Frint Name of Person Resigning)		(Print Title)
of this limited lial resignation in wri		e limited liability company has been notified of my
Sammare of Resi	gning Member, Managing N	fember or Manager
Filing Fee:	\$25.00 (Required)	
Cartified Const	\$20.00 (Ontional)	•

CR2E079 (5/06)