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SECRETARY OF STATE

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## **COVER LETTER**

Division of Corporations	
SUBJECT: 107 Silver Palm (Name of Limited)	LLC, a Fla. limited liability co. I Liability Company)
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	s matter to:
George Zamora Cog (Contact Person)	2001 HAR - SECRETA TALLAHA
(Firm/Company) 3191 Cirol Way Ste. 40	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
Miani FL 33 145 (City/State and Zip Code)	
For further information concerning this matter,	please call:
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to to the state of the state	he Florida Department of State for:  \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



## 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 limited liability company as it appears on the records of the Flor	rida Dep	artment	,
of State is: 107 Silver Palm LLC	⊼s	2 <u>11</u>	
2. This limited liability company was organized under the laws of:  Florida.	CRETARY OF ST	DIMAR -5 AMII: 22	Si i Bran imm F &
3. The Florida document/registration number of this limited liability company is:	F STATE FLORIDA	: 22	
of this limited liability company and affirm the limited liability company has been	it Title)	d of my	
Signature of Resigning Member, Managing Member or Manager			
Filing Fee  Certified Copy:  \$26.00 (Required) \$30.00 (Optional)			