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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
•	_
SUBJECT: Global Assets Advisors, LI	
(Name of Limited Liability	(Company)
The enclosed member, managing member or manager r filing.	esignation and fee(s) are submitted fe
Please return all correspondence concerning this matter	to:
Hope L. Newsome	
(Contact Person)	<del></del>
International Assets Advisory, LLC (Firm/Company)	<u> </u>
300 S. Orange Ave. Suite 1100 (Address)	· 
Orlando, FL	
(City/State and Zip Code)	
For further information concerning this matter, please c	all:
Hope L. Newsome at ( 407	7 ) 254-1516
(Name of Contact Person) (Area C	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid	la Department of State for: \$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 bbal Assets Adviso		of the Florida De	partm	ent 
	lity company was organized of Florida	under the laws of:			
3. The Florida docu L0100001	ment/registration number of 2320	this limited liability comp	oany is:		
4. 1, Menashe Franke	I on Behalf of Lakeside Assets, L	LC , hereby resign as a _	MGRM		<del></del>
(Print Na	me of Person Resigning)		(Print Title)		
of this limited liab resignation in wri	ility company and affirm the ting.	limited liability company	has been notifie	ed of r	ny
Signature of Resig	gning Member, Managing M	ember or Manager		07 MAR	SECRE DIVISION
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		·	28 PH I	TARY OF S