LO4000037134

•	
(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:	
•	

Office Use Only



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10/10/08--01008--003 **35.00



T. CLINE

OCT 13 2008

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Mayn's Constal Real 4411 (Name of Corporation) DOCUMENT NUMBER: LOY 000037136		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing	g.	
Please return all correspondence concerning this matter to the following:		
Show Delson (Name of Person) Michigan Coad Realty UC (Name of Firm/Company) 15 SE 9 Avenue (Address) (City/State and Zip Code) For further information concerning this matter, please call:	2008 OCT 10 AM 10: 49 SECRETARY OF STATE TALLAHASSEE.FLORIDI	Shall and Shall
(Name of Person) at (FATE ORIDA	

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314



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 Florida Departmen
of State is:	Mason's Coostal Realty & LCC
of State is.	Trouble Control of the Control of th
2. This limited liab	ility company was organized under the laws of:
	ument/registration_number of this limited liability company Is:
	- Tell 9
	THE MANAGEMENT OF THE PROPERTY
3. The Florida docu	ument/registration number of this limited liability company 18:
)	-04000037136 ES E
<u>_</u>	-0900031130 To I
/ 1	DOMAGA A
	MB Ole Ser, hereby resign as a 37MBR
(Print N	ame of Person Resigning) (Print Title)
	bility company and affirm the limited liability company has been notified of my
resignation in wri	iting./)
1	1/
Signature of Physic	mile Mamber Managing Member or Manager
Signature of Kesh	gning Member, Managing Member or Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)