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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	
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Special Instructions to Filing Officer:	
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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: ELR INVESTMENTS LLC (Name of Lim	tited Liability Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
•	
ROBERT J. RUIZ	
(Name of Person)	
ELR INVESTMENTS LLC	
(Firm/Company)	
8101 Park Blvd., Miami, FL 33126	
(Address)	
Miom: El 22426	
Miami, FL 33126 (City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, pl	lease call:
, ,	
Robert J. Ruiz	at (305) 216-9323
(Name of Person)	(Area Code & Daytime Telephone Number)
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 &
CD2C070 (9/05)	Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, ROBERT J. RUIZ	, hereby resign as MANAGER
	(Title)
of ELR INVESTMENTS LLC	
(Limited	Liability Company)
a limited liability company organized under	the laws of the State of FLORIDA
and affirm that the limited liability company	has been notified in writing of the resignation.
	3-16-2006
(Signature of resigning man	nager, managing member or member)

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