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#### **COVER LETTER**

TO: Registration Section

**Division of Corporations** 



## SUBJECT: EAD BEACHFRONT INVESTMENTS, 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:

## Santiago J. Padilla, Esq.

(Contact Person)

Law Offices of Santiago J. Padilla, P.A.

(Firm/Company)

1001 Brickell Bay Drive, Suite 3200

(Address)

## Miami, Florida 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Santiago J. Padilla, Esq. 305 358 1949

(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

1. The name of the	limited liability company as i	it appears on the records of the	ne Florida Department
	ility company was organized		H PH + 46
3. The Florida doct <u>L05000014</u>	nment/registration number of	this limited liability company	y is:
4. I, ESTEBAN	A. DEAK	, hereby resign as a MG	RM
	ame of Person Resigning)	, nercoy resign as a	(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability company ha	as been notified of my
Signature of Resi	gning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		