## L05000030358

(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:  A. LUNT			
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SECRETARY OF STATE
ALLAHASSEE FINALE

## **COVER LETTER**

TO: Registration Section

CR2E079 (5/06)

Division of Corporations			
SUBJECT: Serfer Realty, LLC			
(Name of Limite	ed Liability Company)		
The enclosed member, managing member or mfiling.	nanager resignation and fee(s)	are submitted for	
Please return all correspondence concerning th	nis matter to:		
Michael L. Trop, Esq.			
(Contact Person)			
Adorno & Yoss LLP			
(Firm/Company)		===	
350 East Las Olas Boulevar	cd, 17th Floor	NECKI	
(Address)		ASA SA	-
Fort Lauderdale, FL 33301		1999 JUN IT P 2: IÙ SECRETARY OF STATE ALLAHASSEE, FLORIDA	
(City/State and Zip Code)	-		
For further information concerning this matter	, please call:		
Michael L. Trop	at ( 954 ) 766-7802	!	
(Name of Contact Person)	(Area Code & Daytime Teleph	one Number)	
Enclosed please find a check made payable to  X \$25 Filing Fee	the Florida Department of Sta \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADI	DRESS:	
Registration Section Registration Section			
Division of Corporations	ivision of Corporations Division of Corporations		
Clifton Building			
2661 Executive Center Circle	Tallahassee, Flor	rida 32314	
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	s of the Florida Department
of State is:	Serfer Realty, LLC	<u>.</u>	·
2. This limited liab	ility company was organized	I under the laws of:	$R_{\rm S}$
3. The Florida docu	ument/registration number of 030358	f this limited liability con	npany is: SEE
4. 1,(Print N	. Serfer  ame of Person Resigning)		member and manager
of this limited lial resignation in wr	bility company and affirm the iting.	e limited liability compa	ny has been notified of my
<u>Eida</u>	12		
Signature of Resi	gning Member, Managing M	lember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

E.