

LO5000040015

(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:

Mr. Semerant GAVE

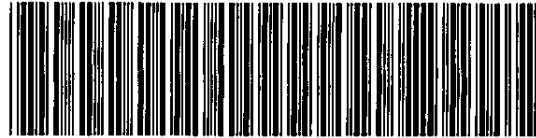
AUTHORIZATION BY PHONE TO

CORRECT DOC# TO LO5-40015

DATE 3/20/07

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR 19 PM 12:03

B. Tedlock MAR 20 2007

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Castor Homes Construction Group 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:

JEAN-Romei Semexant  
(Contact Person)

Castor Homes Construction Group LLC  
(Firm/Company)

14744 LAGUNA BEACH Circle  
(Address)

ORLANDO FL 32824  
(City/State and Zip Code)

For further information concerning this matter, please call:

JEAN-Romei Semexant at (407) 825 95 01  
(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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR 19 PM 12:03

**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 Department of State is: Castor Homes Construction Group LLC.

2. This limited liability company was organized under the laws of:

State of Florida

3. The Florida document/registration number of this limited liability company is:

L05000040015

4. I, ANDREI POLIZANOV, hereby resign as a Member  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)