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D. BRUCE

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EXAMINER

COVER LETTER

	stration Section ion of Corporations			
SUBJECT:	Timeshare Broker Sei	vices of Flori	da, LLC	
	(Name of	Limited Liability Co	mpany)	
The enclosed filing.	I member, managing member	r or manager resig	gnation and fee(s) are submit	ted for
Please return	all correspondence concerni	ing this matter to:		
Robert L E	Bender			
	(Contact Person)	·	- ,	AE SE
Timeshare	Broker Services of Fl	orida, LLC	_	9 SEP CRET
	(Firm/Company)			ARY SSE
5623 Inter	national Drive			SEP 22 PH 2:5 CRETARY OF STATE AHASSEE. FLORID
	(Address)		_	S TAI ORI
Orlando, F	Florida 32819			DA DA
	(City/State and Zip Code)	=	-	
For further in	formation concerning this m	atter, please call:		
Robert Be	nder	at (407	, 782-6261	
(Na	ame of Contact Person)	(Area Code	& Daytime Telephone Numbe	<u>r)</u>
Enclosed plea	ase find a check made payab \$25 Filing Fec		Department of State for: \$55 Filing Fee & Certified Copy	
Registration S Division of C Clifton Build	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

of State is: Time	limited liability company as it a eshare Broker Services lity company was organized ur	of Florida, LLC	Torida Depar	tment 09 SEP 22	
L050001119	10 ft 10 10 10 10 10 10 10 10 10 10 10 10 10	is limited liability company is:	OF STATE E. FLORIDA	PM 2:51	ſ
4. I, FRANK LAROCHE (Print Name of Person Resigning)		, hereby resign as a MANA	GER		
		(1)	Print Title)		
resignation in wri			een notified o	of my	
Signature of Resig	gning Member, Managing Men	nber or Manager			