## L06000000837

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SECRETORY OF STATE
TALLAHASSEE FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: VICTOR REAL ESTATE (Name of Limited L	
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
ALEXANDER KOVACS	AR AR
(Contact Person)	SECRE PARY U
VICTOR REAL ESTATE INVEST	MENT LLC
(Firm/Company)	Z: WI
6303 WHITE OAK LANE	•
(Address)	<del></del>
TAMARAC FL 33319	
(City/State and Zip Code)	
For further information concerning this matter, pl	lease call:
ALEX KOVACSat (	754 ) 246-0559
(Name of Contact Person) (	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	e Florida Department of State for:  \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	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

<ul> <li>1. The name of the limited liability company as it approf State is: FLORIDA</li> </ul>	pears on the records	of the Florid	a Depa	ertment	
2. This limited liability company was organized unde FLORIDA	r the laws of:	SECRETAR) TALLAHASSI	2001 AUG 13	T	-
3. The Florida document/registration number of this l L06000000837	imited liability con	or STATE	ロジェ	O	· <del>-</del>
4. I, ALEXANDER KOVACS (Print Name of Person Resigning)	hereby resign as a	MANAG (Print	ING Title)	MEM	BĘR
of this limited liability company and affirm the limi resignation in writing.	ted liability compa	ny has been n	otified	of my	
Signature of Resigning Member, Managing Member	er or Manager				
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)					