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SECRETARY OF STATE OF STATE OF STATE OF CORPORATIONS

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COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: Tamach Gables Square,	LLC
	Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Jose J. Leonardo	
(Contact Person)	
Law Offices of Jose J. Leonardo, E	sq.
(Firm/Company)	
12515 N. Kendall Drive, Suite 222	
(Address)	
Miami, Florida 33186	
(City/State and Zip Code)	 .
For further information concerning this matter,	please call:
Jose J. Leonardo at	(_305 _) 275-9177
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	ne Florida Department of State for:
\$25 Filing Fee	\$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 32314
Tallahassee, Florida 32301	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

SECKETARY OF SIALE DIVISION OF CORPORATION

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

	imited liability company as it a nach Gables Square, Ll	- · ·	of the Florida Department
2. This limited liabil Florida	ity company was organized und	der the laws of: 	
3. The Florida docui	ment/registration number of thi	s limited liability con	npany is:
4. I, Tamach Inv	vestments, Inc.	_, hereby resign as a	Managing Member
(Print Na	me of Person Resigning)		(Print Title)
resignation in writ	ility company and affirm the lining. In the line ing. Member, Managing Mem		ny has been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		