L06000025912

(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:





700092281837

03/16/07--01019--007 **25.00

PILED 07 MAR 16 AM 10: 32 SECRETARY OF STATE TAIL AHASSEE, FLORIDA

et denumer MAR 1 9 2007

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Biltmore 57 LLC (Name of Limited Liability Co	mpany)
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to	:
(Consect Person)	_
Det-alco Real Estate Granip	_
399 NO BOCA ROTON BLVD.	-
Proca Raton, 1-1, 3343. (City/State and Zip Code)	_
For further information concerning this matter, please call:	•
(Name of Contact Person) (Area Code) 391-4141 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I	Department of State for: \$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

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	e limited liability company a Biltmore 57 LU		of the Florida Department	•
2. This limited lia	bility company was organize	d under the laws of:		
4	cument/registration number of 00025917	of this limited liability comp	any is:	
(Print)	Name of Person Resigning) ability company and affirm th		Thraging Members (Print Title)) has been notified of my).C.1
Signature of Res	igning Member, Managing N	Member or Manager	7 SF	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		FILED MAR 16 AM 10: URETAKT OF STA LLAHASSEE, FLOT	

CR2E079 (5/06)