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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

DA Thomas MAY 20 2000

COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: MARAVILLAS (Name of Limited L.)	WEST REALTY 33, La iability Company)
The enclosed member, managing member or manafiling.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this r	
RAFAEL CABRERA (Contact Person)	
MARAVILLAS WEST REALTY (Firm/Company)	33,LLC
10412 SW 23 TER	· .
MIAMITL. 33/6 (City/State and Zip Code)	65
For further information concerning this matter, ple	ease call:
RAFAEL CABRERA at (Name of Contact Person) (A	305) 389-832/ Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	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

1. The name of the limited liability company as it appears on the records of the Florida Departm	ent	
of State is: MARAVILLAS WEST REALTY 33, LLC	98 H	
2. This limited liability company was organized under the laws of: FLORIDA	1 SECHETAGE OF S	TILED ST.
3. The Florida document/registration number of this limited liability company is:	SHE SHE	38
4. I, RAFAEL CABRERA, hereby resign as a MBRM (Print Name of Person Resigning) (Print Title)	_	
of this limited liability company and affirm the limited liability company has been notified of no resignation in writing.	ny	
Signature of Besigning Member, Managing Member or Manager		

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)