L040000118183

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section

Division of Corporations			
SUBJECT: Euro Southeast Group, LI	LC		
(Name of Limited		npany)	
The enclosed member, managing member or ma filing.	ınager resig	mation and fee(s) are subm	itted for
Please return all correspondence concerning this	s matter to:		
David A Duroure		_	
(Contact Person)		_	
Southeast Real Estate Advisors, LL	.C		
(Firm/Company)		-	ZOU ZAL
9425 W. Park Village Dr.			2007 SEP 20 SECRETAR TALLAHASS
(Address)		_	
Tampa, FI 33626			OF STATE
(City/State and Zip Code)		-	21/2
For further information concerning this matter, p	please call:		RIDA RIDA
David A Duroure at	727	517-6082	
(Name of Contact Person)	(Area Code	& Daytime Telephone Numb	er)
Enclosed please find a check made payable to the \$25 Filing Fee		Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations P.O. Box 6327	
Clifton Building 2661 Executive Center Circle		Tallahassee, Florida 3231	Δ
Tallahassee, Florida 32301		Taranasco, Fronta 325 r	7
CR2E079 (5/06)			
PART BERTHREET):	,		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

of State is: Euro Southeast Group, LLC			··		
This limited liability company was organized under Florida	er the laws of:				
3. The Florida document/registration number of this L06000108183	limited liability company is:	SECRETARY TALLAHASSE	2007 SEP 20	ALL TOTAL DE	[70] [71]
4. I, David A Duroure	, hereby resign as a Memb	er Es		1	
(Print Name of Person Resigning) of this limited liability company and affirm the lim resignation in writing.	ited liability company has bee	rint <u>Tidlē)</u> □ m en notifie	C۱		
Signature of Resigning Member, Managing Memb	er br Manager				
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)					

CR2E079 (5/06)