#206000121818

(Re	questor's Name)	
(Ad	dress)	
(Adı	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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SECRETARY OF STATE

K.SALY EXAMINER APR 18 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LANDMARK FINANCIAL	EXPERTS LLC
(Name of Limited	Liability Company)
The enclosed member, managing member or managing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	s matter to:
WALTER TAPANES	
(Contact Person)	***************************************
LANDMARK FINANCIAL EXPERT	SLLC
(Firm/Company)	
1275 W 47TH PL SUITE 105	
(Address)	
HIALEAH, FL. 33012	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
WALTER TAPANES at	305 ₎ 827-1033
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	he Florida Denartment 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	

CR2E079 (5/06)



FILED 12: 10

12: APR 16 PM 12: 10

SECRETARY OF STATE FALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as NDMARK FINANCIAL		of the Florida Department
2. This limited lial FLORIDA	pility company was organized	under the laws of:	
3. The Florida doc 	ument/registration number of 1818	this limited liability con	npany is:
4. I, MIGDALIA	A PEREZ	, hereby resign as a	SECRETARY
(Print Name of Person Resigning)		• • •	(Print Title)
resignation in w	Alle		ny has been notified of my
Signature of Res	ngning Member, Managing M	lember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy	\$30.00 (Optional)		