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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: A HTERNATIVE REALTY ASSOCIATES LLC (Name of Limited Liability Company)						
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to:						
Gwen Martin (Contact Person)						
ALTERNATIVE REACTY ASSOCIATES LLC Changing name to (Firm/Company)  SW Costal Re						
306 Del prado Blud. S.  (Address)						
Cape Coral, F 33904 (City/State and Zip Code)						
For further information concerning this matter, please call:						
Swen L Marin at (239) 549-7981 Represented the Contact Person) (Area Code & Daytime Telephone Number)						
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee  Certified Copy						
STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations						

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

			appears on the records of ASSOCIATES.		epartment
2. This limited liab	-	pany was organized ι	under the laws of:		DIVISION OF CO
_ KØ 700	0001	119	his limited liability comp	·	PH 12:
4. I, <u>Robe</u> ( <i>Print N</i>	+ (. Tame of Per	Morgan son Resigning)	, hereby resign as a _	MGRM (Print Title	2: 51
	bility con		limited liability company		
Signature of Resi	gning Mo	ember, Managing Me	mber or Manager		
Filing Fee: Certified Copy:		0 (Required) 0 (Optional)			
	\$ 0	5502			