101000009014

(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:				
		·		

Office Use Only



700096950847

04/19/07--01027--012 **25.00

2001 APR 19 PM 12: 48
SECRETARY OF STATE

1079074

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: GALERIE BERTIN-TOUBLANC L (Name of Limited Liability Com				
The enclosed member, managing member or manager resignations.	nation and fee(s) are submitted for			
Please return all correspondence concerning this matter to:	•			
Beth A. DeSanto, Esq.	-			
(Contact Person) Corporate & Real Estate Law Group, PL				
(Firm/Company)	-			
1680 Michigan Avenue, Suite 1022	- Ţ.,	2		
(Address) Miami Beach, Florida 33139	SECRE	2007 APR 19		
(City/State and Zip Code)	TARY ASSE			
For further information concerning this matter, please call:	OF ST	PH12: 48		
Beth A. DeSanto, Esq. at (305	479-2616	<u>c</u>		
(Name of 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 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

1. The name of the of State is: GA	limited liability company as it appears o LERIE BERTIN-TOUBLANC L	on the records of the Florida Department
2. This limited liab Florida	ility company was organized under the la	aws of:
3. The Florida doct L0700000	ument/registration number of this limited	i liability company is:
4. 7.	SOLUX LLC , hereb	y resign as a MANAGING MEMBER AND MEMBER
(Print N	ame of Person Resigning)	(Print Title)
of this limited lial resignation in wr	bility company and affirm the limited lia iting.	bility company has been notified of my
x/_		· bold Je Sowxue
Signature of Resi	gning Meraber, Managing Member or M	SET 9
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	PHI2: 48 OF STATE E. FLORIDA