

(Requestor's Na	me)			
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
				
· (Business Entity	Name)			
(Document Num	han			
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Certified Copies Certific	cates of Status			
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Special Instructions to Filing Officer:				
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Professional Boal Estate + Nort g (Name of Limited Liability)	Company)
The enclosed member, managing member or manager refiling.	signation and fee(s) are submitted for
Please return all correspondence concerning this matter t	to:
Wil St. Fean (Contact Person)	
Professional Real Estate and Mortgage So (Firm/Company)	ervices, LLC.
9950 West Cyfress Creek hoad ste #105 (Address)	<u> </u>
Fort Lauckendale FL, 33309 (City/State and Zip Code)	
For further information concerning this matter, please ca	ıl1:
(Name of Contact Person) at (964	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida \$25 Filing Fee	a Department of State for: \$55 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

	limited liability company as it		
2. This limited liab	ility company was organized u	nder the laws of:	
3. The Florida docu	ment/registration number of th	is limited liability company is:	:
1070000		<u> </u>	
4. I, Brenson E	T. FOAN ame of Person Resigning)	, hereby resign as a <u>Trea</u>	SUPER Print Title)
of this limited liab resignation in wri	oility company and affirm the liting.	mited liability company has be	en notified of my
	3		
Signature of Resi	gning Member, Managing Mer	nber or Manager	
•			
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		200 SE

CR2E079 (5/06)

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SECRETARY OF STATE