## L07000013631

(Requestor's Name)				
(Address)				
(Address)				
(Cil	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
! 				

Office Use Only



600110693946

111/15/07--01019 005 \*\*55.00

SECRETARY OF STATE OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: La Rosa Realt (Name of Limited)	Liability Company)	
The enclosed member, managing member or mafiling.	nager resignation and fee(s) are submitted for	
Please return all correspondence concerning this	s matter to:	
Joseph La Rosa (Contact Person)		
(Contact Person)		
La Rosa Realty Comp	50, le 500	
(Firm/Company)		
215 Celebration PL	Suite 500 3	
(Address)		
Celebration FL 34747 (City/State and Zip Code)	<u> </u>	
(Cayroanc and 214 Conc)		
For further information concerning this matter, I	please call:	
(Name of Contact Person)	(407) 592-4667 (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
ifton Building P.O. Box 6327		
61 Executive Center Circle Tallahassee, Florida 32314		

CR2E079 (5/06)

Tallahassee, Florida 32301



## 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	limited liability company as	s it appears on the records	of the Florida Department
of State is:	La Rose Reclty	Commercial.	LLC.
(), Guite 151			0 10
			70
2. This limited liab	ility company was organize	d under the laws of:	S E
F/67	18	•	OT OCT 15
			2
3. The Florida docu	ment/registration number o	f this limited liability com	ipany is: PH 1: 50
	76000 /3 63/	<del></del>	ő
4.1, Mich	ame of Person Resigning)	, hereby resign as a	Manager
(Print N	ame of Person Resigning)		(Print Title)
of this limited lial resignation in wr	oility company and affirm thiting.	ne limited liability compar	ny has been notified of my
/69	The Common of th		
Signature of Resi	gning Member, Managing	Member or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		