101000052863

1

(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



600124785116

SECRETARY OF STATE

T. CLINE

APR 2 2 2008

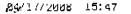
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SELER LLC. (Name of Limited Liability Comp	pany)
The enclosed member, managing member or manager resign filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
ERHAN SAKAOGLU, ESQ.	
(Contact Person) ERHAN SAKAOGLU P.A. (Firm/Company)	
2701 WEST OAKLAND PARK BLVD.	UNIT 405
OAKLAND PARK, FL 33311	
(City/State and Zip Code) For further information concerning this matter, please call:	2008 APR 21 SECRETAR: TALLAHASS
ERHAN SAKAOGLU, ESQ. at (954	486-3711 SER 2
(Name of Contact Person) (Area Code &	
Enclosed please find a check made payable to the Florida De	o <u>∺</u> ≡ €
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

	LER LLC.	appears on the records of	the Florida Department	
2. This limited liab	oility company was organized u	nder the laws of:		
3. The Florida doct <u>L070000</u>	ument/registration number of th	nis limited liability compa	uny is:	
	ame of Person Resigning)	, hereby resign as a	MGRMZ 2	
of this limited lia resignation in wr	bility company and affirm the litting.	imped jability company	has been notified of myo	77
Mustafa Signature of Resi	O. CEVIK as MGR igning Member, Managing Mer	<u> </u>	COUP LIGHT 24	M
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	· , ·	•	