## L07000077599

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SECRETARY OF STATE

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Emeshel LLC	
(Name of Lim	ited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Clemens W. Pauly, Esq.	
(Contact Person)	
Pauly P.A.	
(Firm/Company)	<del></del>
815 Ponce de Leon Blvd.	
(Address)	
Coral Gables, FL 33134	
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
Clemens Pauly	at ( 305 ) 648-3909
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t  \$25 Filing Fee	to the Florida Department of State for:  \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	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: Em	limited liability company a eshel LLC	s it appears on the records	s of the Florida Departmen	t
2. This limited liab Florida	ility company was organize	ed under the laws of:		
3. The Florida doct L07000077	ument/registration number o	of this limited liability con	npany is:	
4. I, Maria Cec		, hereby resign as a	Manager	
	ame of Person Resigning) bility company and affirm t		(Print Title)	,
Signature of Resi	gning Member, Managing I	Metaber or Manager	2011 APR SECRET	want pa
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		RII MID E	Parent land