## L07000087364

(R	equestor's Name)			
	ddress)			
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(A	ddress)			
(C	ity/State/Zip/Phon	ne #)		
PICK-UP	WAIT	MAIL		
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d)	usiness Entity Na	me)		
(D	ocument Number	) .		
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Special Instructions to	Filing Officer:			
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Office Use Only



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## **COVER LETTER**

Division of Corporations	
SUBJECT: Heliopolis Construction, LLC	
(Name of Limited Liability C	ompany)
The enclosed member, managing member or manager resfiling.	ignation and fee(s) are submitted for
Please return all correspondence concerning this matter to	<b>)</b> :
Nader Goubran	
(Contact Person)	_
Heliopolis Construction, LLC	
(Firm/Company)	<del></del>
2310 NW 3rd Avenue, Suite 8	
(Address)	Z0071
Pompano Beach, Fl 33060	DEC - AHAS
(City/State and Zip Code)	RRY I
For further information concerning this matter, please cal	DEC - V AMIO: 06 CRETARY OF STATE _AHASSEE, FLORID,
Seth Lipson at ( 561	) 478-1011 중 중 중
	le & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida  \$25 Filing Fee	Department of State for:  \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations
2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	rananassee, rioriua 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

	mited liability company as it appolis Construction, LL		of the Florida D	epartmen	ıt.
2. This limited liabili Florida	ty company was organized und	der the laws of:			
3. The Florida docum L070000873	nent/registration number of this 364	s limited liability com	npany is: 콘성	201	
4. I, Yvette Louk	a	_, hereby resign as a	Managing \$	/lembe	r
	ne of Person Resigning)	_, hereby resign as a	(Print Fith		j j
of this limited liabil	lity company and affirm the lin	nited liability compar	ny has been note	, fied∙ <b>€</b> f my	y P
resignation in writi			OF STATE E. FLORIDA	AM 10: 06	
Filing Fee:	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				