L07000096856

. (Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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SECRETARY OF STATE TALLAHASSEE EL DOILS

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: REALTY		
(INA	me of Limited Liability Comp	oany)
The enclosed member, managing m filing.	ember or manager resign	ation and fee(s) are submitted for
Please return all correspondence con	ncerning this matter to:	
ALBERT RE(Contact Person)	DAIGUES	
(Contact Person)		
REALTY SUCCES	S GROUP LO	·c
(* company)		
14545 BROADHA	VEN BOUN	
(Address)	ocio peop	
(
ORCANDO, FC.	32828	
(City/State and Zip C	ode)	
(313).21111 1111 = 4	,	
For further information concerning	this matter, please call:	
40 ALBERT	at (<u></u> 4 0 ገ	371 9422
(Name of Contact Person)	(Area Code &	Daytime Telephone Number)
		0.00
Enclosed please find a check made \$25 Filing Fee		
523 Filing Fee	\$ ³	5 Filing Fee & Certified Copy
		Септев Сору
STREET/COURIER ADDRESS:	I	MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle	-	Γallahassee, Florida 32314
Tallahassee, Florida 32301		

CR2E079 (5/06)



March 19, 2009

ALBERT RODRIGUES REALTY SUCCESS GROUP LLC 14545 BROADHAVEN BLVD. ORLANDO, FL 32828

SUBJECT: REALTY SUCCESS GROUP LLC

Ref. Number: L07000096856

We have received your document for REALTY SUCCESS GROUP LLC and check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Our records do not indicate that you are the registered agent of the subject limited liability company. Therefore, no resignation is required to be filed.

Your name is listed as a manager, to resign as manager the enclosed resignation form should be completed and returned to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 109A00009413

SECRETARY OF STATE TALL AHASSEE, FLORIDA

2009 MA 65 9AM 8: 00

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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: R						
2. This limited liab		-	nder the law	s of:		DOD HAR 3D PM 1:49 SECRETARY OF STATE ALLAHASSEE, FLORIDA
3. The Florida docu 	-		his limited lia	ability comp	any is:	TE AGI
,	•	0 0			•	•
of this limited lial resignation in wri		and affirm the	limited liabil	ity company	has been n	otified of my
Signature of Resi	gning Membe	r, Managing Me	mber or Man	ager		
Filing Fee: Certified Copy:	\$25.00 (Re \$30.00 (Op	• '				

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