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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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DIVISION OF CORPORATIONS

T Hampton NFC 18 2007

COVER LETTER

Division of Corporations						
SUBJECT: REYNS REALTY OF P	PALM BEACH LLC					
(Name of Limited 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:					
SOPHIA HAYLE						
(Contact Person)						
REYNS REALTY OF PALM BEA	CH LLC					
(Firm/Company)						
6264 PARADISE COVE						
(Address)						
WPB FL 33411						
(City/State and Zip Code)						
For further information concerning this matter	er, please call:					
SOPHIA HAYLE	at (561) 596-2907					
(Name of Contact Person)	(Area Code & Daytime Telephone Number)					
Enclosed please find a check made payable t	o the Florida Department of State for:					
\$25 Filing Fee	\$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 32314					
Tallahassee, Florida 32301						

CR2E079 (5/06)

TO: Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as YNS REALTY OF PA		of the Florida De	par	tment
2. This limited liab	ility company was organized FLORIDA	d under the laws of:			
3. The Florida doct	ument/registration number o	f this limited liability com	npany is:		
4. I, FITZROY (Print N	LEWIS ame of Person Resigning)	, hereby resign as a	MGRM (Print Title)		
of this limited liab resignation in wr	bility company and affirm the iting.	e limited liability compar	ny has been notific	ed o	f my
	gning Member, Managing N	Member or Manager		07.DEC	SECRETA DIVISION OF
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			07 DEC 7 PM 2: (RY OF STATE CORPORAL